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Nursing Comes to the Last Frontier

RAE CHITTICK

Where the swirling waters of the South Saskatchewan bend and curve, a painted medicine man once swayed and danced to heal his Blackfoot chief. Whether it was because of the wildness of his supplications or the violence of the wind that blew down the valley no one knows, but the swift current of the mighty river claimed his head-dress of beautiful feathers. It was an evil omen and the medicine man, losing faith in himself, fled into the Cypress Hills to be seen no more. Many years later there arose, at the site of this accident, a town named to commemorate this tragedy, and here was founded the first hospital for the care of the sick in the North-west. Perhaps the gods remembered their unkindness and were now making restitution.

The Medicine Hat Hospital opened its doors to the sick on January 9, 1890. A grand opening had been planned but the formalities had to be postponed on account of a severe epidemic of influenza. However, the formal opening when it came, was indeed a gracious and historic event. The dedication services were conducted by the Rev. Mr. Herald, who paid a tribute to the energy and enthusiasm of the citizens who were responsible for bringing to a successful consummation the work of "this vast enterprise". Although the vast enterprise was staffed with but one nurse and her assistant without domestic help, it represented careful planning and persistent effort of a group of people with courage, high ideals and an altruistic spirit.

The two-storied building was constructed of cut stone and during the course of the building the plans were altered to provide for a mansard roof

which gave rooms on the third storey for the nurses and for an isolation ward.

The Calgary Herald of January 21, 1890, carried a detailed account of the Hospital and its furnishings from which the following paragraph is taken:

> The surgery has a concrete and cement floor with a sewage pipe in the centre and a ceiling ten feet in height. The three floors are plumbed throughout and heated by steam and open grates.

The hospital cost twenty thousand dollars and this sum, with the exception of a grant of five thousand dollars from the Dominion Government and a small grant from the Canadian Pacific Railway and Northwest Legislative Assembly, was raised by private effort and individual subscription. Considering that Medicine Hat at this time was little more than a railroad camp with a few scattered ranches beyond, this was a noble effort. Among the interesting donations was the gift of two handsome rattan rocking chairs from the Countess of Selkirk and her travelling companion, the Countess of Shrewsbury.

Miss Birtles is seated to the right

The first superintendent of the new hospital was Miss Grace Louise Reynolds who was a graduate of Leeds, in England; her first Matron had been Miss Gordon, who had trained under Florence Nightingale. Miss Reynolds' assistant was Miss E. Birtles, a graduate of the Winnipeg General Hospital. The division of work was unique and is stated best in Miss Birtles' own words:

> Miss Reynolds and I managed the work between us. She prepared the meals and looked after the downstairs work; I attended to the furnace and did the upstairs work, sweeping, dusting, etc., besides attending to the patients. When any surgical work was to be done, we had to arrange the work accordingly. Miss Reynolds gave the anaesthetic and I looked after the instruments and waited on the doctors. There was no sterilizer, so we had to resort to boiling the instruments in a large saucepan with a steamer on it for towels and dressings.

The training school for nurses was begun in 1894, and the first class consisted of two nurses who completed their work in January, 1896. Some of the rules governing the young lady in training are worthy of mention:

> She must spend at least fifteen minutes in the open air every day, either within or off the hospital grounds, unless excused by the lady superintendent; she must attend church once every Sunday; and she may not receive gentlemen friends in the parlour except by special permission of the lady superintendent.

Although no educational qualifications for applicants were stated in the requirements, they did provide for an entrance examination in reading, penmanship,

arithmetic and English dictation. With these simple educational qualifications in mind, it is interesting to read the examination paper in surgery given the first class in 1895. Here is a sample question which might confound much more erudite candidates:

> Suppose a patient to be brought into the hospital with severe lacerations of the arm involving all structures — integument, muscles, tendons, bones and blood vessels — in which there is severe haemorrhage, both venous and arterial. State what treatment and dressing you would apply until the arrival of a physician and what palliative treatment you would adopt in the meantime.

It is gratifying to note that the two candidates obtained ninety per cent of the total number of marks.

In this early School, the training was not confined to the hospital. Student nurses might be sent to care for any urgent case within the great area served by the hospital. Nurses were sent as far east as Regina, west to Lethbridge, and to many intervening points such as Swift Current and Maple Creek. The charge to the patient made by the Hospital for the service of the nurses was one dollar per day. The Medicine Hat General Hospital has not forgotten its brave beginning, and today offers excellent care to the sick and a superior training to student nurses. The school has graduated 268 nurses, and the present superintendent is Miss Agnes E. Pederson, a graduate of the School.

January 30, 1941, will mark the fiftieth anniversary of the coming of the Gray Nuns to Calgary. At two o'clock in the morning, four nuns of the Order of the Sisters of Charity stepped off the train, accompanied by Father Leduc who had met them in Winnipeg. Not a cab could be found, and into the dark and bitterly cold night they walked

MEDICINE HAT GENERAL HOSPITAL, IN 1894.

The photograph, taken by R. H. Trueman, shows only the entrance. Standing on the steps are Dr. J. B. Peters, Miss Jean Miller, Miss A. C. Miller (Matron), and an unidentified nurse. Identification by Mrs. J. R. Millican, a student nurse of that time.

on their way to the Sacred Heart Convent. The Calgary of that day had no street lights and, indeed, no streets at all between the Canadian Pacific Railroad tracks and 19th Avenue where the Convent was situated. That walk, the darkness, the cold, and the weight of their baggage made their coming memorable in the annals of the Order.

On this same day, the four Sisters took possession of their new hospital, an unfinished building twenty-four feet square, two storeys in height and heated by one small stove. The Superior of the

Holy Cross Hospital in these difficult days was Rev. Sister Carroll, well known and beloved by early settlers in the Calgary district. On April 10, 1891, the first patient was admitted to the hospital; he was suffering from a severe nose-bleed but history does not say whether the epistaxis was idiopathic or the result of a violent collision — probably in the Royal Bar.

As spring warmed into summer, Sister Carroll set out to collect funds in the construction camps along the Canadian Pacific lines. Between April 10 and the end of the year, 64 patients had been admitted; the little hospital was already too small and a permanent hospital was planned in the early months of 1892. Rev. Sister Hamel came to Calgary in 1892 and selected the site of the present Holy Cross Hospital; the land was donated by the Oblate Fathers, who also gave 25,000 bricks. A contract was signed for the construction of a building to cost the staggering sum of $6,000. In addition, there was to be a heating plant to cost $2,500. To meet this expenditure the women of St. Mary's parish held a bazaar and also sent one of their members with Sister Carroll to collect funds in the neighbourhood of Macleod and Pincher Creek. The new building was opened on November 20, 1892, and has not closed its doors since. In 1929, a new wing was added so that the hospital now has room for 325 beds. The School of Nursing was begun in 1907 and the first graduates, five in number, received their diplomas on February 8, 1910. Each year has seen its quota of well-trained nurses go forth from the institution and there are now about 144 nurses in training.

The first nurse to graduate in Calgary was Miss Marion Moodie, who formed a class of one to receive her diploma in 1898 from the Calgary General Hospital. Miss Moodie entered as a probationer in the original hospital — a small house with accommodation for eight patients. Since there was a serious demand for nurses, due to the prevalence of typhoid fever which stalked along the railroad camps, the Protestant Hospital Board deemed it urgent to begin a training school. Miss Moodie writes thus of her first days on probation:

> The building had seen the earlier and rougher days of the town and when taken over as a hospital had bullet holes through some of the doors. On the ground floor there was one ward holding four beds; an office; a dining-room, which was converted into an operating room when necessary, and a kitchen. Upstairs there were four small rooms each holding one bed and, over the kitchen, two small rooms for the staff and the cook. As the first pupil nurse, I entered on St. George's Day, April 23, and was sent to get what sleep I could in a vacant bed upstairs. I was to commence my probation by taking charge while the matron and the head nurse got a chance to rest. An hour later I was roused to make room for a new patient, and until the stone building now used as an isolation hospital was ready three weeks later, I occupied the cook's room by day while the cook had it at night.

For a probationer, Miss Moodie had her hands full. She tells of having to watch a man with severe bronchitis, downstairs; another with delirium tremens, upstairs; and in a room opposite, one dying of cancer. She had strict orders to see that one did not choke, the second did not jump over the banister, and that the third got relief from pain. However, as Miss Moodie says, "these rules had to be obeyed more in spirit than in letter, and all spare moments for some nights were spent sitting on the top step of the staircase by the can-

cer man's door, in sight of the D.T.'s door, and, at any rate, within sound of the bronchitis man's cough".

In 1895, the nucleus of the building fund was the gift of a young Chinaman who, when dying, willed the proceeds of the sale of his property to the erection of a general hospital. The balance of the money was raised by a grant from the City, by public subscription and by private donations. This building served the people of Calgary for fifteen years and then became the isolation hospital when the present General Hospital was opened in 1910.

Seven hundred and forty-three students have graduated from the Calgary General Hospital School of Nursing since its inception. These graduates are scattered over the world and engaged in many types of nursing. A strong and loyal feeling for their *alma mater* has grown up with the passing of the years which has made possible one of the most energetic alumnae associations in Canada. The members have been active in contributing to the hospital equipment and furnishings, and in 1939 raised $1200 for the Canadian Red Cross Society by means of a very beautiful ice frolic.

Less than fifty years ago, Indians, buffaloes and timber wolves roamed unmolested on the undulating uplands above the Old Man River. Then, trappers, wolfers and whiskey-traders discovered "black stones" which were much to be preferred to "buffalo chips" as a fuel over which to fry their bacon. That discovery produced tremendous changes. Near the site of old Fort Whoop-up was founded the city of Lethbridge, the centre of one of the greatest coal-producing areas in the world. Big companies moved in to develop this hidden wealth, and with their workers came the need for a hospital.

Photo by C. W. Binkley

MARION E. MOODIE

The Galt Hospital in Lethbridge was the second to be founded in Alberta. It was erected by Sir Alexander T. Galt, who was then Canadian High Commissioner in London, and interested in the Lethbridge coal deposits. The first medical superintendent was the late Dr. F. H. Mewburn, one of the most colourful and well-known figures in the medical history of pioneer days in the West. The school of nursing was established in 1910, and the hospital now cares for one hundred patients.

And so time marches on! Buffaloes, Indians and trappers no longer roam the grassy plains, and railroad construction camps are gone from the prairies. But we still pay reverent tribute to those men and women who with vision and courage blazed the trail for the fine institutions that now offer care to the sick and give opportunities for learning the art and science of nursing.

The Perennial Problem of Pain

FRANK TURNBULL, M.D.

Writers of fiction and shallow-minded philosophers have for centuries created a very inaccurate conception of physical pain. It has been held up by some as a sort of moral purge, by others as a mere idea which a truly heroic soul can master. If there are any physicians or nurses who accept this stoical attitude toward human suffering, they must be very callous, or at least very unobservant. But we are all prone to underestimate the degree of misery. There is only one pain that is easy to bear; it is the pain of others (Leriche).

An acute agonizing pain usually dominates the victim's consciousness. For the duration of the painful experience he is pre-occupied, unattentive, unable to concentrate on physical and mental activities. During the agonizing experience time passes at a slower pace, each minute seems an hour. Very severe pains are rarely accompanied by mental depression; there is not room for physical and moral pain to exist together. The presence of two distinct pains simultaneously is rarely noted. Hippocrates has stated, 'of simultaneous pain in two places, the lesser is obliterated by the greater.' Biting one's finger until sharp pain is produced will give complete relief from a number of dull aching pains. This new pain is a welcome although temporary relief. Long suffering from a single type of severe pain makes all other pains pale in comparison. A patient who has suffered from trigeminal neuralgia for years will endure the pain of an alcoholic injection with surprising fortitude.

Contrary to our experience with all other sensations pain may never become exhausted, never let go. I have observed a man who was stricken one day with agonizing pain in his right arm. For nine years he never went more than five minutes in his waking hours without suffering a pain like red-hot needles pushed up under his nails and projected through the skin of his forearm. His hair was prematurely grey, his facial expression so strained and wrinkled that he looked fifteen years older than his age. Pain was no fortunate warning, no reaction of defence on the part of the body, in that miserable man. The lesion responsible for this calamity was thrombosis of a tiny artery in his brain. This pathological process had long since ceased from being an active disease, but the pain went marching on.

Pain is hopelessly inefficient as a warning of disease or mal-function. Harmful influences, such for example as an overdose of X-rays applied to the skin, may proceed to total destruction of an area with no hint of pain being given. In serious diseases pain does not often warn us of danger in time. Consider the two greatest scourges of mankind, heart disease and cancer. Pain arrives in these maladies too late to warn the victim, and only serves to make him more miserable.

Complete understanding of another's pain is limited by the victim's intellectual status and his command of language, because pain is entirely subjective. Harassed judges who are required to assess damages in cases of alleged pain, have often expressed a desire for a machine which would measure pain in mathematical terms. But such an instru-

ment is an impossible conception, for there are too many intangible factors involved in the matter. Between individuals there exists definite variations in tolerance and in sensitiveness to pain. Variations in tolerance appear frequently as a trait of nationality, race, or of age. It is said that many Cossack soldiers can undergo operations, such as amputation of a foot, without any anesthetic and with no sign of discomfort. The "Oi, Oi" of the Israelites, which has echoed down through the ages as a symbol of continued persecution, is no less an evidence of lessened tolerance for pain.

Beside causes of increased or decreased tolerance for pain which may be said to arise outside the individual, there are many causes within the individual which may vary his tolerance. Under the stress of strong emotion such as excitement, anger, or pleasure, the threshold of pain becomes temporarily raised. The lacrosse player may have no recollection of the injury which caused his bruise. Prolonged insensitivity to pain may occur in periods of religious ecstasy. Were it otherwise, many martyrs who were burned at the stake would surely have cried out in their anguish. The practical development of hypnotism as an anesthetic agent in surgery was only interrupted in the late nineties by the chance discovery of chloroform and ether.

In 1932, while on their way to a meeting of the British Medical Association in Australia, two learned English scientists investigated the act of fire-walking by the natives of Fiji. In this performance the actors first assemble in a native hut where they are shrieked at by witch-doctors. Thereafter they run outside and dance for several minutes on coals of fire. The eminent observers were present at the same performance, and both of them examined the actors before and after, but they disagreed in their conclusions. One claimed that there was no manifestation of pain because the natives were in an hysterical trance, while the other thought that insensitivity resulted from years of practice, by repeated exposure to heat of the thick skin on the soles of their feet.

Disease may be present in an individual with no evidence of pain until one or more other conditions arise. An interesting example is the much-quoted experience of the German surgeon, Billroth. He related that at a concert "when the soprano, with incredible assurance, took a high B a quarter of a tone too high," he suffered a severe pain in a tooth that had never before been painful. On the following day investigation showed that the tooth was carious.

Gross examples of insensitivity to pain are found in certain cases of mental defect and insanity. Idiots and imbeciles often injure themselves by striking their heads, gnawing their hands, or threshing their bodies. A story is told of an idiot who was found beating his head against a wall and when asked why he did it replied that "it's so fine when I leave off." Very rarely an individual who seems otherwise normal exhibits complete absence of the sensation of pain. In Robert Ripley's "Believe It or Not Emporium" on Broadway, New York, there is a performer from Jersey City named Joseph Costello, who claims to be insensitive to pain. He proves his contention by sewing buttons on his chest and by allowing favoured members of the audience to use his bare back as a darts board.

Perverted trends of conduct may be linked with the mechanism of pain. Sadism, the desire to inflict pain, and masochism, the desire to suffer pain, are well recognized psychological states. A sublimated form of sadism is apparent

to anyone who listens to the crowd at a wrestling match, and more brutal forms in some of the refined methods of Nazi terrorism.

After these digressions about some of the general features of pain let us return to the more sordid aspect of pain in relation to disease. I have already stated that disease which is heralded by pain is not always amenable to medical treatment. This is seen, for example, in some malignant growths of the nasopharynx. In other cases, such as postherpetic neuralgia, the disease becomes quiescent but some remaining perversion of the nerve pathways is responsible for a continuous flood of painful impulses. Again, as in some cases of carcinoma of the mouth and throat, the pain may be successfully allayed by sedatives as long as the disease lies within the domain of one major sensory nerve; but, when the disease spreads further afield pain often becomes insufferable. It is obviously our duty to do everything possible to relieve such misery, by surgical measures if medicine alone is not sufficient.

It is sorrowful to reflect on the present state of international conflict when we recall the two men who have probably contributed more to our understanding of pain and its surgical relief than any others. These two men, who are personal friends, are a German, Professor Foerster, and a Frenchman, Professor Leriche. Professor Foerster's outstanding contribution has been a study of the surgical procedure for relief of pain which is termed cordotomy. Painful sensation from the extremities and from the trunk travel toward the spinal cord by devious paths. But once these painful impulses enter the spinal cord their pathway becomes very localized and precise. They enter the cord, cross to the opposite side, and ascend to the brain in a pathway which is close to the surface and just in front of the middle of the cord. If one of these pathways is destroyed the individual will lose all sense of pain on the opposite side of his body below the level of the lesion. This observation forms the basis for cordotomy. In this operation the spinal cord is exposed by a laminectomy and one or both pain tracts are transected. The patient loses the sensation of pain in the affected area but not the sensation of touch, and he has no loss of motor power.

Cordotomy is a major operation but can be carried out with very little risk to life. Unilateral cordotomy has no serious complications. Bilateral cordotomy is apt to be complicated by retention of urine which necessitates use of a catheter. It is obvious that cordotomy is not an operation to be undertaken lightly, but I feel certain that it is not used frequently enough. Its chief value is for relief of intractable pain in the trunk or legs during the late stages of cancer. How frequently do we see patients whose death is hastened not alone by their cancer, but as much by the ever-increasing doses of morphia. Morphia may relieve their pain as long as it keeps them asleep. While awake, although stupid from large doses of the drug, they are yet in misery. If the patient has three months or longer of life in prospect, and is suffering unbearable pain, it is better to relieve his pain by cordotomy and leave him with a clear mind, than to dull his intellect by increasing and often ineffective doses of sedative.

The chief contribution made by Professor Leriche to our understanding of pain and its surgical relief has been his repeated demonstration of the important role which is played by the sympathetic nervous system. This system consists chiefly of a cord of neural tissue which

lies outside the spinal canal, along each side of the vertebral column, in the lower cervical, thoracic, and upper lumbar region. These sympathetic trunks communicate with the spinal cord and have in-going and out-going branches which pass to every part of the body along with the regular spinal nerves and in the walls of the blood-vessels. Activity of the sympathetic nerves in the extremities is manifest by coldness of the skin and sweating. If we paralyse, by novocain infiltration, the sympathetic trunk at the point of entry of fibres from a limb, that limb will become warm and dry.

A great number of pains are accompanied, and a few possibly caused, by overactivity of the sympathetic nervous system. If you have ever nursed on the Compensation Board wards of any large hospital you will recall a type of patient who illustrates this relation. This is the man who has received a minor puncture wound of a finger, or toe, or crushing injury of his hand or foot, and who continues to suffer from severe pains which appear to be entirely out of proportion to the initial injury. In the worst of these cases you will note that the affected limb is cold and moist in contrast to the other limbs. The patient protects his limb with extra clothing and mitts, and is fearful lest it be accidentally knocked by a careless examiner. He can often predict the onset of stormy weather by increasing pain. Any noise in his vicinity or emotional upsets aggravate his distress. He may become a harassed, unhappy, miserable being, seemingly always immersed in his pain. It is easy to label such a man as neurotic and say that the pain is all in his mind. But that is of no help to the patient, and it explains nothing.

Why is the painful limb usually colder and moister than the other limbs? Why is the pain so frequently affected by changes in weather? Why does the pain spread from the site of injury to involve the whole limb or even half the body? The answer to these and many other difficult problems lies in the relation of the sympathetic nervous system to this type of pain. Leriche has demonstrated repeatedly that if sympathetic activity in the affected limb is paralysed by infiltration of novocain, the pain disappears. Even though the normal sensations may be evoked by pinprick, light-touch, heat and cold, the individual is rid of his agonizing pain as long as the sympathetic nerves remain paralysed. Fortunately in many instances the pains are permanently diminished, and in a few cases apparently cured by one or more of these simple infiltrations.

There are many types of pain which are markedly affected by activity of the sympathetic nervous system. It will require more years of intensive clinical observation before the exact relation is clarified. It is not a problem that can be settled by animal experimentation. But the final answer will take us a long way toward a complete understanding of the pain mechanism. Every year brings us a more complete understanding about pain, but a great deal has yet to be learned. The greater knowledge that every nurse has of this perennial problem, the more effective will be her efforts to relieve the distress of each individual patient.

References

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2. Die Leitungsbahnen des Schmerzgefuhls und die chirurgische Behandlung der Schmerzzustande; Foerster, O.; Urban & Schwarzenberg, Berlin, 1927.

3. La Chirurgie de la Douleur; Leriche, R.; Masson et Cie, Paris, 1937.

Reader's Guide

In ***Notes from the National Office,*** you will find the tentative programme of the forthcoming General Meeting of the Canadian Nurses Association. This programme affords an excellent outline of the nature and scope of the many activities of the Association which will be reported upon at that time. Further information concerning the addresses to be delivered by distinguished guest speakers will be given in subsequent issues.

On the cover of this *Journal* is an authentic portrait of a Blackfoot medicine man; in "Nursing Comes to the last Frontier", ***Miss Rae Chittick*** tells us about his legend and how Medicine Hat came by its name. She also gives a vivid picture of the development of nursing service and education in Southern Alberta. Miss Chittick is instructor in health education in the Provincial Normal School, Calgary, Alberta.

Yet another inspiring page in the history of nursing in Canada appears in this *Journal;* the story of fifty years of nursing in the Montreal General Hospital is told by ***Miss Mary S. Mathewson,*** president of the Alumnae Association. Miss Mathewson is associate director of the School for Graduate Nurses, McGill University.

In his pain and distress, the patient turns to the physician and to the nurse for relief and solace. ***Dr. Frank A. Turnbull*** displays deep and sympathetic insight into the nature and alleviation of pain. He is a member of the Attending Staff of the Vancouver General Hospital, department of neurology and neuro-surgery.

Intestinal parasites constitute a health problem which is becoming increasingly serious, especially in those sections of the country where the population is migratory. ***Dr. W. B. McClure*** presents most valuable information concerning the prevention and control of diseases arising from this source. Dr. McClure is a member of the staff of the Division of Laboratories of the Ontario Department of Health, Toronto.

A Call to Service

The following appeal has been received from Miss Grace W. Gibberd, missionary secretary of the Student Christian Movement of Canada:

On behalf of the mission boards of the Canadian churches, we are anxious to place the need for missionary nurses before as wide a group as possible. The need for nurses in medical missionary work, both in Canada and overseas, is always greater than the number of those applying for the work. This year the call for war nursing makes it more than ever difficult to fill the very urgent calls that are before us. These include—five nurses for India, three for China, one each for Africa, Japan and Korea, and several for Eskimo and Indian hospitals in Northern Canada.

We would appreciate the opportunity of making the needs known, and suggest that any nurses who are interested should apply to the Student Christian Movement office, 1164 Bay Street, Toronto 5.

Fifty Years of Nursing at the "M.G.H."

MARY S. MATHEWSON

On February 20, 1890, Miss Nora Gertrude Elizabeth Livingston, the newly appointed Lady Superintendent, arrived at the Montreal General Hospital — a day to be remembered, for it marked the initiation of an era that revolutionized the care of patients, and the establishment of a Training School which earned a place of its own in the record of Canadian nursing.

This Hospital, founded in 1821, owed its origin to the little four-roomed House of Recovery opened in 1818 by the Female Benevolent Society for the "relief of those suffering under the double calamity of poverty and disease." Through the years the institution expanded to meet the demands of the growing city, and in 1821 a group of public spirited citizens assumed responsibility for its financial support. The first medical school in Canada was conducted by the physicians attending the hospital, and medical students were taught in the wards after the Edinburgh plan. The nursing was carried on by untrained women, and although many were kindly, they learned by experience at the expense of the comfort and safety of the patients.

To meet the increasing demand for trained nursing in the Hospital, Miss Nightingale was approached in 1875, and later in that year Miss Maria Machin, a graduate of St. Thomas's in London, with four other trained nurses, arrived at the Hospital, the first graduates to undertake the proper nursing of patients in Montreal. Miss Machin brought about many reforms, secured further reinforcements from England the next year, and prepared to establish a training school. However, increasing friction with the governors and senior resident led to Miss Machin's resignation in 1878, in spite of the support of the majority of the medical board. The other Nightingale nurses left with her, and Miss Rimmer, an English gentlewoman but untrained in nursing, was appointed as superintendent. In 1880 Miss Anna Caroline Maxwell of Boston was secured as "Lady Trainer of Nurses," under the direction of Miss Rimmer, and a second attempt to establish a Training School was made. Miss Maxwell found the administrative arrangement impossible and left at the end of six months. Both Miss Machin and Miss Maxwell later established beyond doubt their qualities of professional leadership, but apparently considered the obstacles at the Montreal General Hospital virtually insurmountable. For nearly ten years Miss Rimmer carried on the work with the partially trained and untrained women available, resigning in 1889 due to ill health. The Committee of Management then determined to appoint a successor who would be competent to establish a Training School, and secured the services of Miss Livingston, a recent graduate of the New York Hospital.

Nora Gertrude Elizabeth Livingston was born on May 17, 1848, at Sault Ste. Marie, Michigan, and spent her early life in the United States where her father was acting in the interests of the famous Northwest Company. When she was twenty years old, the family came to reside at Como, near Montreal. It was there that Doctor Shepherd first knew her, and he was later instrumental

in persuading her to accept the position at the Montreal General Hospital. At the time of her appointment Miss Livingston was 41 years of age, and had been engaged in private nursing in New York after completing her training of eighteen months at the New York Hospital in 1889. Two other New York graduates came to help her in the undertaking, Miss Quaife who assisted during the day, and Miss Collyer at night.

Immediately revolutionary changes took place throughout the Hospital, and very shortly a two-year course leading to a diploma in nursing was offered to suitable girls over 21 years of age. Applications poured in and the Training School for Nurses was opened on April 1, 1890, just six weeks after Miss Livingston's advent. In order to meet immediate needs, the most promising of the nurses in the Hospital at the time were encouraged to remain. Those chosen were Miss Alicia Dunn, who acted as matron after Miss Rimmer left and later took charge of the operating room, Miss Jessie Preston, and Miss Georgina Caroll. Miss Livingston also persuaded Miss Julia English, Miss Christina McKay and Miss Ellis Chapman, who had formerly nursed in the Hospital, to return. These six women were given special instruction, and, because of their experience, were granted badges and diplomas at the end of one year, the first graduates of the Training School.

NORA LIVINGSTON

The curriculum for the two-year course included twenty-one lectures covering a wide field. Anatomy, physiology, hygiene, bandaging, dietetics, emergencies such as fits, unconsciousness and haemorrhage were discussed by the doctors, whose willingness to help in the better preparation of nurses made a real contribution to the reputation of the School. Nursing practice was learned from Miss Livingston by precept and example. A twelve-hour duty period for day and night nurses was instituted, decent living quarters provided by the addition of a fourth storey to the Hospital, and a uniform introduced which the Governors described as "a composition of pink and white gown with a neat cap and badge,, all esthetic and antiseptic." The first uniform was made of pink and white striped print which was replaced in 1894 by a deeper pink print with conventional pattern and in 1897 by the well known MGH monogram print which is still worn, with slight modifications.

During the second year, three hundred applied for admission to the School; forty-five were admitted and thirty-six retained. The graduates were in demand for, in addition to preparing women to staff the Hospital and for private nursing in homes, many calls

Courtesy of the Gazette, Montreal

At the Commemorative Meeting of the Alumnae Association, Miss Margaret Browne (right) impersonated the graduate of 1892; *she wears the red silk "head nurse" badge and a red pincushion pinned to her belt. Miss Eileen Sherlock (left) represented the graduate of* 1940. *Part of the historical exhibit is visible, including at the left a Lister Spray.*

were received for nurses to organize training schools in other parts of Canada and in the United States. Progress was made from year to year, and in 1895 the course was lengthened to three years. In 1897 a Nurses' Home was built and a dietitian appointed. In 1906 a preliminary class was instituted and Miss Flora Madeline Shaw, (a member of the Class of 1896) after special preparation at Teachers College in New York, was appointed as full-time instructor, the first such appointment in Canada.

Miss Livingston was a particularly keen judge of character and ability and gathered about her a staff of high principled and competent women. When she retired in 1919 because of ill health she had laid the foundations of the School so well and truly that the task of building for the future was left in capable hands. Following her resignation, Miss Livingston lived quietly with her sister until her death on July 24, 1927, in her eightieth year, maintaining a keen interest in her "girls" until the end.

Miss Sarah Edith Young, who succeeded Miss Livingston, was born in Quebec in 1877 and graduated from the Training School in 1900. After a brief period of private nursing, Miss Young returned to the Hospital to become second assistant and later first assistant to Miss Livingston, remaining until 1916 when she was released for military nursing service with the Canadian Forces overseas. In 1919 she was recalled, owing to the illness of Miss Livingston, and was chosen to carry on the work which the founder had begun.

During Miss Young's term of office, the teaching staff was trebled and more graduate Sisters were appointed to the wards. Teaching equipment and library facilities were augmented, student nurses were given three hours off duty instead of one as formerly, and student government was inaugurated. In 1926 a new Nurses' Residence was opened which provided more adequate living and recreational accommodation in addition to a complete teaching unit, one of the most-up-date on the continent.

At the time of her death in December 1927, Miss Young was only fifty years of age, but she left an imprint on the nursing tradition of the Montreal General Hospital which will never be effaced. It is rare to find two women so entirely different and yet so thoroughly imbued with the same high ideals of service as Miss Livingston and Miss Young, and how much rarer it is when a third Superintendent is found who not only carries on the best of the old tradition, but adds a special contribution of her own. Such was indeed the case in the choice of Miss Young's successor, Miss Mabel Kathleen Holt, the present Superintendent and Principal of the School for Nurses.

SARAH E. YOUNG

Miss Holt was born in Sussex, England, and graduated in 1919, by a coincidence with the last class under Miss Livingston's régime. After a short time spent in private nursing, Miss Holt joined the staff as second assistant to Miss Young, the next year assuming the position of instructor. Miss Holt then undertook a year of further study at the School for Graduate Nurses, McGill University, returning to her own School in 1924 as instructor for a time before accepting an appointment as assistant superintendent of nurses at the Hamilton General Hospital. She was recalled to the Montreal General Hospital on account of Miss Young's illness in 1927 and in December of the same year Miss Holt was appointed as the third Superintendent of the School.

During the critical years of the depression, Miss Holt found ways and means to avoid lowering hard-won educational standards. She persuaded the Committee of Management to permit the staffing of the new Private Patients' Pavilion entirely with graduate nurses on the eight-hour plan, which arrangement considerably relieved an urgent unemployment problem. In 1937 a public health nurse was appointed with special responsibility for the development of a complete health service for student nurses, as well as for the integration of preventive aspects throughout the undergraduate course.

The years have brought many changes, and the twenty-one lectures provided for the pioneers have been succeeded by a curriculum in keeping with the demands of the new day. The staff

MABEL K. HOLT

of three graduates and thirty-eight student nurses of 1890 has grown by 1940 to include a superintendent who is also principal of the training school; a day and a night assistant; four full-time instructors; forty-five graduate nurses; two hundred and ten students, in addition to the seventy-six graduates serving the Private Patients' Pavilion. More than sixteen hundred nurses have been granted the diploma of the School.

In its first fifty years, three outstanding Superintendents have guided the destiny of the School, their task made possible by the loyal support of co-workers too numerous to name individually. However, mention must be made of three women who have made notable contributions to the standard of nursing set by the Montreal General Hospital — Miss Nora Tedford, for twenty-one years in charge of the operating room; Miss Jennie Webster, O.B.E., who acted as night superintendent for thirty-three years; and Miss Flora Strumm. For nearly forty years Miss Strumm has self-effacingly played her part as Assistant in turn to Miss Livingston, Miss Young, and Miss Holt, acting a a co-ordinating link between the old and the new, tiding over each change in administration, thus making possible a continuity of service which has been both invaluable and unique.

What changes the next fifty years will bring to the practice of nursing it would be futile to predict. New and better ways will inevitably be found, but the spirit of nursing engendered by Miss Livingston must be preserved — in her own words, "the *patient* must always come first."

EDITOR'S NOTE:

A report of the Commemorative Meeting of the Alumnae Association will be found on P. 245.

Intestinal Parasites in Man

W. B. McCLURE, M.D., D.P.H.

Disease producing parasites of various kinds are to be found in the intestine of man. In the tropics and subtropics there are a large number of these parasites and even in temperate climates certain forms are quite common. In Canada there are a number which are of interest from a medical and public health standpoint. These organisms may be divided into those consisting of a single cell and known as protozoa; and those of many cells, the metazoa. Among the protozoa there is one which causes dysentery; it is the *endamoeba histolytica* and is the cause of endamoebic dysentery. The important metazoa are the beef tapeworm (*taenia saginata*), the pork tapeworm (*taenia solium*), the fish tapeworm (*diphyllobothrium latus*), the common round worm (*ascaris lumbricoides*), the pinworm (*oxyuris vermicularis*), and the pork round worm (*trichinella spiralis*).

Dysentery in Canada is most often due to bacilli and is known as bacillary dysentery. However, cases of endamoebic dysentery do occur. The organism which causes this infestation is the *endamoeba histolytica* and consists of a single cell which is four to seven times larger than a red blood cell. There are two forms of the parasite (1) the actively moving form (vegetative form), and (2) the resting form (cyst). When a person is suffering from the disease these vegetative forms are to be found in the large intestine where they produce severe ulcers in the intestinal wall. These ulcers may cause perforation of the intestinal wall or severe haemorrhage. In the warm stool under the microscope one may see these parasites moving about.

After the person has been ill for a week or more, especially if there has not been any treatment given, these moving forms decrease in number and are replaced by the cysts. The parasite decreases in size, produces a thick wall around itself and the cyst is formed. These cysts are passed in the stool and can live for about a week but in fresh water they will live for over a month. They are easily killed by drying, and in one hour by half-strength brine. These carriers with the cysts in their stools, if they are careless in their personal hygiene, carry the disease to well persons.

In order that control may be effected, diagnosis of the disease should be made as soon as possible. This may mean repeated examination of stool specimens by the laboratory until the parasite has been found. The case is treated with heavy doses of emetine hydrochloride or carbarsone.

Water supplies should be protected. If the water is obtained from mountain streams or springs, the sources should be protected from contamination. Chlorine, when used in the dosage for killing bacteria, will not kill the cysts. Sand filtration is essential to remove them. In tourist or trailer camps if there is any doubt as to the quality of the water it should be either boiled or passed through a sand filter.

In the country, or in summer camps where no septic tanks are installed, sanitary flyproof privies are essential. This is very important in summer camps as tourists from the Southern United States are sometimes carriers of the disease. In urban districts the sewage should be so treated that all the cysts will be re-

moved. If the sewage is not treated and flows into a body of water, then the raw sewage must be kept away from bathing beaches or water intakes. Flies and cockroaches may carry the cysts to man's food supply. The cysts will live 48 hours in the intestine of the fly and they may also carry them on their feet. Cockroaches may also carry the cysts about, therefore all food supplies must be protected.

Tapeworms (*cestodes*) are segmented worms consisting of a small head, about pin-head in size, to which is attached the segmented body. These segments gradually increase in size until they become ripe at the end of the worm. A single worm may be from several feet to over forty feet in length and the male and female elements are present in each segment. When ripe, they break off and are to be found in the stool. Inside the ripe segments are the eggs of the worm.

Beef tapeworms (*taenia saginata*) are parasites which live in the upper part of the small intestine of man. Not many worms are present at any one time and the segments have no birth pores, so that no eggs are seen in the stool unless one of the ripe segments is broken up and the eggs released. If the eggs in the faeces find their way to pasture land they may be eaten by cattle. In the cattle, larvae are formed which find their way to the muscles where they live for a long time. When persons eat this meat improperly cooked they may develop a tapeworm. The patient should be treated with male fern to remove the worms.

Control may be effected by proper disposal of faeces; human faeces should not be allowed to reach pasture land. Meat inspection in abattoirs will pick out infected carcasses. In cold storage it takes three weeks for the larvae in the meat to die, but if the meat is frozen solid they will be killed in six days. Adequate cooking of beef is essential; a temperature of 140 degrees Fahrenheit for five minutes will kill the larvae. Smoking or salting does not kill them for some time.

Pork tapeworms (*taenia solium*) are rare in Canada but persons are infested from eating raw or improperly cooked pork. The history of this worm is similar to that of the beef tapeworm, but the pig is the intermediate host. The larvae are present in the muscles of the pig and the adult tapeworm lives in man's intestine. Occasionally a human being with a tapeworm in his intestine may become infected with the eggs from his own worm. In such a case, the eggs hatch and the larvae find their way to various parts of the body. They have been found in the brain, liver and heart as well as in the various muscles. The patient should be treated with male fern to remove the worms.

The control of these parasites is effected by proper disposal of human faeces; pigs will eat human faeces and are therefore easily infested. Meat should be inspected for infested carcasses which are known as "measly pork." These larvae are more resistant than beef tapeworm larvae and cold storage does not kill them. Adequate cooking is essential; a temperature of 140 degrees Fahrenheit for five minutes will kill the larvae in the meat.

Fish tapeworms (*diphyllobothrium latus*) may cause infestation in man if improperly cooked fish is eaten or even by tasting fish before it is cooked. There is a birth pore in the segments of this worm so that the eggs are always seen in the stool of an infested person. When

the egg finds its way into a lake or stream it develops into an actively moving form which then finds its way into the body of a snail, where it develops. When the snail is eaten by a fish, the larva undergoes further development in the muscles of the fish.

This worm was first introduced into America by Finlanders who settled around the Minnesota lakes. Fishes in these waters soon became infested, so that today many of the fish in the Great Lakes have the larvae in their muscles. .Fish tapeworms may also form in the intestines of dogs that have eaten raw fish scraps. When a person has these worms he may develop a severe anaemia which resembles pernicious anaemia. The anaemia is cured by the removal of the parasite. Male fern should be given to remove the worms.

Fish should not be tasted before being cooked, and should be thoroughly cooked before eating. A temperature of 150 degrees Fahrenheit for five minutes will kill the larvae in the muscles of the fish. Untreated human or dog faeces should not find their way into lakes or streams where the snails will became infested. Raw sewage from cities should have a preliminary treatment to remove the eggs before flowing into lakes. Dogs should not be fed raw fish scraps.

Trichinella spiralis is a round worm which is obtained from infested pork and may be transmitted to man if the pork is insufficiently cooked. In man's intestine a small round worm develops which is about one-sixth of an inch in length. In about seven days this worm is fully developed and starts to produce very small embryos; it does not lay eggs. These embryos are about one-fiftieth of an inch in length; they penetrate the wall of the intestine and find their way to the muscles where the body builds a wall around them. The infestation in man is very severe and causes death in some cases.

The pig becomes infested by eating raw pork scraps in garbage, or by killing and eating infested rats; the rats get the disease by eating one another as they are cannibalistic in nature, or by eating infested pork. In the United States there is a great deal of this disease; an infested pig in a meat-packing plant may find its way into a large batch of sausages and in this way the disease becomes more widespread. In Canada, there is a federal law which states that persons collecting garbage to be fed to swine must first obtain a licence from the government and that all the garbage that they collect must be boiled. For this reason the incidence of trichiniasis in Canada is quite low.

Control may be effected by the following measures: uncooked garbage should not be fed to swine; pork for human consumption should be well cooked; as the infestation is kept alive among the cannibalistic rat population, it is essential to control rats and prevent them from coming near swine.

Pinworms (*oxyuris vermicularis*) are worms which, in man, develop in the small intestine and when fully developed find their way into the large intestine. They are about half an inch in length and are also known as thread worms. At night, the female worms crawl through the anus and lay their eggs on the skin around it and then return to the intestine. This movement of the worm causes a great deal of itchiness around the anus; the eggs when laid are fully developed and if swallowed they will at once form new worms. In this way, children especially are very easily re-infested.

The eggs are not often found in the faeces and, in order to tell whether a person is infested or not, a swab is used on the end of which is fastened a piece of cellophane about one inch square. This swab is rubbed around the anus and any eggs that are there will adhere to the cellophane. By placing the cellophane under the microscope any eggs which may be present will be seen.

In the United States, various surveys show that about 30 percent of the population have pinworms. In certain institutions and hospitals for children in Canada, recent investigations have shown that from 40 to 70 percent of the children harbour the worms.

One worm will lay from 4000 to 16,000 eggs, and as many as 4000 worms have been found in a heavily infested individual. In homes where cases are present, the eggs have been found in the house dust, rugs, chairs, and even over the tops of door casings where they have been carried by air currents.

In infested homes where there are several children the control of this condition is very difficult as there are so many possibilities for reinfestation. All persons in the household should be treated with drugs to rid them of the parasites. Hexylresorcinol may be given twice a week for two weeks. During the course of treatment all the bed linen should be boiled twice a week. A thorough housecleaning should be instituted to get rid of the eggs lying around the house.

Personal hygiene is important; the hands should be washed before meals and after stool. In children, the fingernails should be kept short and in some cases collodion on the ends of the fingers will keep the eggs from getting under the fingernails. The anal region should be washed frequently and shower baths are most desirable. In institutions for children it has been found that shower baths are superior to tub baths to keep down the incidence of these worms.

All members of the household should have individual towels. Underclothing should not be left lying about and should be washed frequently. Vegetables and fruits should be washed before being eaten in the raw state.

Round worms (*ascaris lumbricoides*) are worms resembling earthworms, but are flesh coloured. Male and female worms are usually present; if there is only a male worm there will be no eggs in the stool but the eggs are constantly found when a female worm is present. When the eggs are passed in the stool they will not infest a person until they have undergone a preliminary stage in the soil where they will remain alive for long periods of time. When one of these developed forms in the ground is swallowed, the little worm comes out of the egg and penetrates the intestine and finds its way to the lung where it is coughed up and swallowed. It then forms the adult worm in the intestine and takes about two and a half months to become fully grown. The round worm in the pig looks very much like the human round worm but it is a different species and man does not become infested with the pig ascaris.

The infested person should be treated with drugs such as the oil of chenopodium to remove the worms. Human excreta should be kept away from soil where persons may come in contact with the developed eggs. Fruits and vegetables to be eaten in the raw state should be washed before being eaten. The hands should be washed before eating, and unwashed hands should be kept away from the region of the mouth.

Nursing Service, R.C.A.M.C., C.A.S.F.

The Canada Gazette announces that Nursing Sister, H. N. Stevenson, has been appointed to be Matron. The following have been appointed to be Nursing Sisters:

Margaret G. Grandy, I. M. Chipman, D. A. Rastoul, C. R. Blue, M. L. Tomlinson, H. G. Adams, A. M. Allen, M. Baldwin, F. P. Bennest, C. M. Brazier, D. M. Brown, C. E. Browne, M. F. Cascaden, N. E. Harburn, D. A. Howland, D. J. Low, C. T. Lunn, C. M. Mackay, O. E. Meadows, M. M. McCulloch, D. I. Rawson, S. J. Roberts, M. B. Soulier, M. Stanley, M. L. Taylor, F. H. Watt, H. E. Wilson.

H. E. Campbell, A. Clake, E. C. M. Honey, E. C. Leishman, P. A. L. Lundgren, J. M. McCowan, F. F. Macleod, F. W. Spafford, H. I. Sutcliffe.

A. M. M. Nicholson, A. E. Norsten, H. M. Ross, K. M. Warham, A. M. Millar.

Book Reviews

PRINCIPLES OF PSYCHIATRIC NURSING, by MADELENE ELLIOTT INGRAM, R.N. 428 pages. Illustrated. Published by the W. B. Saunders Company; Canadian agents: McAinsh & Co. Limited, Toronto. Price, $3.25.

Reading this book for purposes of review seemed like following a trail leading through a new and challenging field of nursing. Miss Ingram is assistant superintendent of nurses and head instructor in the Sheppard and Enoch Pratt Hospital, Towson, Md., and evidently owes her mastery of her subject to a wide and varied experience of mental nursing. This book is written expressly for the student nurse and contains a wealth of factual detail concerning the nurse herself, her patient, and the nurse-patient relationship. The content is assembled into four units; the first deals with the development of mental nursing; the second with nursing care; and the third with an introduction to a study of clinical psychiatry. Unit Four gives valuable information concerning the management of mental patients when travelling. The final chapter is devoted to a brief outline of the principles of mental hygiene.

The outstanding merit of this book is its directness and simplicity. Its general approach, while eminently sane, is never so detached that it fails to convey a sympathetic understanding of the tragic aspects of mental illness. Its usefulness is by no means confined to the student of psychiatric nursing. Much of its content could be applied in general nursing to equal advantage.

PRACTICAL DIETETICS, with reference to diet in health and disease, by ALIDA FRANCES PATTEE. Twenty-second edition. 868 pages. Illustrated. Canadian agents: McAinsh & Co. Limited, Toronto. Price, $3.25.

The fact that a book attains a twenty-second edition suggests that it continues to serve a useful purpose. Miss Pattee's classic textbook has undergone thorough revision and several chapters have been completely re-written. The subject matter is arranged under the general headings of principles of nutrition, diet therapy, and the practical application of principles of nutrition. Vitamins are discussed clearly and simply. There is a good table of food values showing gram portions, average servings, and vitamin units. Many excellent recipes are given for the cooking of all sorts of food.

Notes From the National Office

Contributed by JEAN S. WILSON,
Executive Secretary, The Canadian Nurses Association

Tentative Programme

The Executive Committee of the Canadian Nurses Association in meeting on September 16, 1939, considered the advisability of holding the next biennial meeting in 1940. By unanimous opinion it was decided that during the present period in the history of Canada every effort should be made to maintain all educational standards and for this reason, if at all possible, the next general meeting should be held as arranged.

The Programme Committee proceeded to draft a programme in accordance with the decision made by the Executive Committee. On the following pages is published a tentative outline of the programme for the Twentieth General Meeting.

The guest speakers are to be Mrs. Rex Eaton of Vancouver, who will give an address at the first evening session, and Dr. A. Vibert Douglas, Dean of Women, Queen's University, Kingston, Ontario.

Arrangements are being made for the customary church services on Sunday, June 23. These are to be held in St. Stephen's Church, and in the Chapel at Holy Cross Hospital.

It will be noted that more time is allotted to the reports of various committees, the national sections, and the provincial associations than has been customary at previous general meetings. This has become necessary owing to the number and variety of studies which have been underway since 1938; also to allow sufficient time for the biennial reports by the federated units and national sections to be discussed thoroughly. Such discussion offers opportunity for the nurses from each province to learn more of what is being encountered and accomplished by all the provincial associations and sections.

The session on Friday afternoon should be of outstanding importance, by then the official delegates, particularly, will have spent several days together and should be prepared to give serious consideration to the preparation of the programme by which the members of the nursing profession can resolutely confront the future.

The Alberta Association of Registered Nurses has asked that plans for Friday evening be left to that Association. Definite details in regard to those plans will be announced in a later issue.

Special Social Functions

Thursday evening, June 27, is left free so that various groups may arrange for an evening of good fellowship and renewing of old acquaintances. Those wishing to make reservations for this type of entertainment for that evening or at other times during convention week should write to Miss Margaret Fraser, Royal Alexandra Hospital, Edmonton.

Transportation

While detailed information concerning transportation to Calgary can be secured from all ticket offices of the Canadian National Railways and the Canadian Pacific Railway, the following statement may prove helpful to nurses who are planning to attend the General Meeting.

(1) The regular summer tourist rates are recommended, these can be secured for (1) twenty-one days, and (2) five months, expiry date being October 31, 1940.

(2) The two railway systems offer similar rates, with stop-over privileges and travel via the Great Lakes if preferred.

(3) There are numerous optional routes from which to choose, details concerning these routes can be obtained at any ticket office of both trans-Canada railway systems.

Hotel Accommodation

Nurses who wish to secure accommodation at the Hotel Palliser are urged to make early reservation. Such requests should be addressed to the Manager, Hotel Palliser, Calgary. Most reasonable rates are offered to members of the Association. The Committee on Arrangements have also submitted rates for accommodation elsewhere than at the convention headquarters. The rates for Hotel Palliser and elsewhere are quoted herewith. The rates quoted are per diem, except when otherwise stated. The prefix "S" means single room; the prefix "D" means double room.

Hotel Palliser—S.R., $3.00; D.R., $2 00; 3 in a room, $1.25; each room has connecting bath.

York Hotel—S.R., $1.50; D.R., $1.25.

Wales Hotel—S.R., $1.75 - $2.50; D.R., $1.25 - $1.75.

Empress Hotel—S.R., $2.00 or $12.00 per week; D.R., $1.50 or $9.00 per week.

Braemar Lodge—S.R., $1.50; D.R., $1.00.

Rooms without bath at slightly lower rates than those quoted above are available at the York, Wales and Empress Hotels and at Braemar Lodge. The Wales and Empress Hotels are termed "family hotels".

Special Information

Inquiries for additional information relative to accommodation should be addressed to Miss Mary Maclear, 1707 Broadview Road, Calgary. Rev. Sister Mansfield, Holy Cross Hospital, Calgary, will be pleased to hear from any religious sisters who wish to secure accommodation while attending the General Meeting.

Accommodation at Banff

The convener of the Arrangements Committee stresses early reservation for accommodation at Banff by those who are planning to go there for the week-end following the General Meeting. By courtesy of two members of the Alpine Club, a limited number of guests can be accommodated at the Club House in Banff. Further information may be secured by writing to Miss Eleanor McPhedran, 205-206, I.O.O.F. Building, Calgary, or to Miss M. F. Lavell, 1005-14th Avenue West, Calgary.

TENTATIVE PROGRAMME OF THE BIENNIAL MEETING

Monday—June 24

9.00 a.m., Section Executive Committee Meetings: *Nursing Education; Public Health; Private Duty.*

11.00 a.m., Special Committee meetings, as may be arranged.

1.30 p.m., Registration.

2.00 p.m., Meeting of the Executive Committee of the Canadian Nurses Association.

6.00 p.m., Dinner, given in honour of the members of the Executive Committee of the Canadian Nurses Association, by the Executive Committee of the Alberta Association of Registered Nurses.

8.00 p.m., Meeting of the Executive Committee of the Canadian Nurses Association.

Tuesday—June 25

General Session, 9.00 a.m.

8.00-9.00 a.m., Registration.

9.00-10.15 a.m., Invocation — The Right Reverend Ralph Sherman, D.D., Bishop of Calgary.

Reading of Minutes of the Biennial Meeting, 1938.

Report of the Honourary Secretary.

Report of the Honourary Treasurer.

Report of the Executive Secretary.

10.15 a.m. to 12.15 p.m., *Presidential Address.* Appointment of press representatives.

Reports of Standing Committees, with discussion:

Publications Committee, Miss Grace M. Fairley.

Arrangements Committee, Miss Kathleen Connor.

Programme Committee, Miss Grace M. Fairley.

Formal presentation of resolutions from the Executive Committee and the Provincial Associations.

Appointment of Resolutions Committee.

Appointment of scrutineers, with instruction regarding ballots.

Roll Call of Federated Associations.

The International Council of Nurses, Miss Grace M. Fairley.

Announcements.

12.15 p.m., Adjourn to view exhibits.

General Session, 2.00 p.m.

2.00-4.00 p.m., *Reports of Special Committees, with discussion*:

Exchange of Nurses, Miss M. K. Holt.

Health Insurance and Nursing Service, Miss M. Kerr.

Community Nursing Service Bureau and Joint Advisory Committee, with recommendations: Miss R. M. Simpson.

Budget Report, Miss A. J. MacMaster.

History of Nursing, Miss M. Mathewson.

Mary Agnes Snively Memorial, Miss J. E. Browne.

General Session, 8.00 p.m.

Chairman: the President of the Alberta Association of Registered Nurses.

Addresses of Welcome:

The Premier of Alberta

The Minister of Education

His Worship, the Mayor of Calgary

The Minister of Health

The President of the University of Alberta

The President of the Alberta Medical Association

The President of the Alberta Association of Registered Nurses.

Response to Addresses of Welcome: Miss Grace M. Fairley, President of the Canadian Nurses Association.

Ceremony: *The Mary Agnes Snively Memorial.*

Address: "Mary Agnes Snively, the woman", Miss Grace M. Fairley, President of the Canadian Nurses Association.

Presentation of the Mary Agnes Snively Medals.

Address: by Mrs. Rex Eaton.

Wednesday—June 26

GENERAL SESSION, 9.00 A.M.

Reports of Special Committees (continued):

9.00-9.30 a.m., Renaming of Sections, Miss M. Kerr.

9.30-12.00., National Committee on Education Progress Report, Miss M. Lindeburgh; Presentation of the Supplement to *The Proposed Curriculum* — "The Improvement of Nursing Education in the Clinical Fields"; (1) The Purpose of the Supplement, Miss M. Lindeburgh; (2) An analysis from the point of view of (a) the basic preparation for public health nursing, Miss M. Kerr; (b) the nurse in general practice, Miss M. Teulon; (c) school of nursing administration, Miss A. J. Macleod. Discussion and Summary.

Overseas Nursing Sisters Association Luncheon.

GENERAL SESSION, 2.00 P.M.

2.00-2.30 p.m., Report of Legislation Committee, including study on the incorporation of the Canadian Nurses Association: Miss M. Millman.

2.30-3.30 p.m., *The Canadian Nurse*: (1) report of the Publications Committee; (2) report of the editor and business manager.

3.30-4.15 p.m. *Florence Nightingale International Foundation*:
(1) Report of the Canadian Florence Nightingale Memorial Committee, Miss R. M. Simpson; (2) report of the Florence Nightingale Memorial Committee of the Canadian Nurses Association, Miss K. Sanderson; (3) report of the Scholarship Award Committee, Miss M. Lindeburgh; (4) a paper descriptive of a year at Bedford College and International House, told by a new "Old International", Miss Bianca Beyer.

4.15-4.45 p.m., *Report on Study*: National Field Secretary and Placement Service.

GENERAL SESSION

7.30 p.m., *Banquet*: Speaker, Dr. A. Vibert Douglas, Dean of Women, Queen's University, Kingston.

Thursday—June 27

CONCURRENT MEETINGS OF SECTIONS, 9.00 A.M.

9.00-12.00., Nursing Education Section.
Private Duty Section.
Public Health Section.

12.15 p.m. *Luncheons for Canadian University Alumnae.*

GENERAL SESSION, 2.00 P.M.

2.00-3.00 p.m., Eight-hour Day for Nurses (Round Table): chairman, Miss K. W. Ellis.

3.00-4.00 p.m., Unfinished Business.

The evening has been reserved for Alumnae Association functions.

Friday—June 28

GENERAL SESSION, 9.00 A.M.

9.00-12.00., Reports of Provincial Associations.
Reports of National Sections.
Discussion.

12.15-2.15., *Luncheon for Instructors.*

AFTERNOON SESSION, 2.30 P.M.

2.30-4.00 p.m., *Forum*: chairman, Miss Elizabeth Smellie, C.B.E., R.R.C., "Nurses and Nursing at Home and Abroad in Time of War".
(1) The need for forward-looking leadership.

(2) Military Nursing Service, our preparation and responsibility.

(3) Safeguarding Canadian nursing standards of Education and Service.

Saturday—June 29

GENERAL SESSION, 9.00 A.M.

9.00-11.00 a.m., Report of Resolutions Committee, including resolutions from Sections.

11.00-12.00., Unfinished business.
New business.
Report of scrutineers.
Adjournment.

2.00-4.00 p.m., Meeting of the Executive Committee, Canadian Nurses Association.

RED CROSS WAR WORK

Early in February, the Executive Committee of the Canadian Red Cross Society issued an invitation to women's national organizations to send representatives to a day's conference on the various aspects of Red Cross war work. The conference was held in Toronto on February 29, 1940. The Canadian Nurses Association was represented by the Executive Secretary, Miss Jean Wilson.

Mrs. A. Plumptre, vice-chairman, War Activities for the Canadian Red Cross Society, presided and in her opening remarks explained that during the last war a committee representing nationally organized societies met from time to time to confer with the Red Cross regarding women's work in the war. It was explained that this committee was purely consultative and advisory and had no legislative or executive powers. The meetings of this committee provided opportunity for friendly discussion of plans and policies and was most valuable to the Canadian Red Cross. With this past experience in mind it was thought advisable to call a conference in order to learn if, after six month's experience in war work, the time had arrived to form a similar committee.

The agenda for this preliminary meeting included talks by representatives of the Canadian Red Cross Society: (1) Dr. F. W. Routley, National Commissioner, who recently returned to Canada after spending several months in England; (2) Mrs. W. R. Campbell, O.B.E., Chairman of the Women's War Work Committee; and (3) Mr. Norman Somerville, Chairman of the Central Council and Executive Committee.

These talks included reference to work already done and plans underway for (1) collection and forwarding of supplies overseas and to the port of Halifax where hundreds of sailors belonging to British and French ships had arrived in need of warm clothing, etc.; and (2) the hospital at Taplow and the Beaver Club in London. The Charter of the Canadian Red Cross Society was explained as to peace and war time activities, to supplying comforts to prisoners of war and men on active service as well as to those in hospital.

Before adjournment, it was decided a similar conference should be held two months later.

NIGHTINGALE MEMORIAL FUND

Contributions to the Florence Nightingale Fund have been received from:

British Columbia:

Miss E. Graves, Britannia Beach .. $ 3.00
Graduate Nurses Association, Fernie 10.00
Graduate Nurses Association, Kamloops 15.00
Graduate Nurses Association, Kelowna 5.00
Graduate Nurses Association, Nanaimo 10.00
Overseas Nurses Association, Victoria 3.00

Nova Scotia:

Miss Ann D. Allan, Windsor 2.00
A.A., St. Joseph's Hospital, Glace Bay 10.00
A.A., Victoria General Hospital, Halifax 10.00
Colchester County Branch, Registered Nurses Association of Nova Scotia 10.00
Halifax County Branch, Registered Nurses Association of Nova Scotia 25.00
Pictou County Branch, Registered Nurses Association of Nova Scotia 5.00
School of Nursing, Aberdeen Hospital, New Glasgow 5.00

Ontario:

A.A., Grant Macdonald Training School, Toronto 5.00
A.A., Ontario Hospital, London 5.00
A.A., Toronto East General and Orthopedic Hospital, Toronto 5.00
A.A., Victoria Hospital, London 15.00
District 1, Registered Nurses Association of Ontario 10.00
Staff, Hamilton General Hospital, Hamilton 14.00

THE A.R.N.P.Q. ANNUAL MEETING

Miss E. Frances Upton, Executive Secretary and Registrar, announces that the twentieth annual meeting of the Association of Registered Nurses of the Province of Quebec will be held on May 9 and 10 in Victoria Hall, Westmount. The annual meeting is usually held in mid-winter but, by changing the date to the pleasant month of May, the Association hopes to attract a larger attendance from all parts of the Province. Although full details are not as yet available, an extremely interesting programme is already assured.

Thursday, May 9

Afternoon Session:

2.30 p.m., General Business Session (bilingual).

The evening sessions in English and in French will be held concurrently.

English Session:

8.30 p.m., "Some implications of the Report on the Study of the Distribution of Medical Care and Public Health Services in Canada" — Dr. A. Grant Fleming, Dean, Faculty of Medicine, McGill University.

"The Eight-hour Day for Private Duty Nurses"—Miss Sally Johnson, R. N., Principal of the Training School for Nurses, the Massachusetts General Hospital, Boston, Mass.

French Session:

8.30 p.m., "The Contribution of the Nurse to Society" — Mme Pierre Casgrain, President, French Section, Canadian Welfare Council.

"The function of the Montreal Health Department and the rôle of the Visiting Nurse" — Dr. Adelard Groulx, C.P.H., Director, Department of Health, Montreal.

Friday, May 10

9.30 a.m., General French session to be held at the Hôtel-Dieu de St. Joseph, Montréal. The speakers will be the Rev. Paul Emil Leger, Professor, Institut Pie XI, who will speak on "The complexity of the training of the modern nurse"; and Dr. Albert Jutras, radiologist, Hôtel-Dieu, Montréal, whose topic will be "X-ray and modern medicine", (illustrated by sound films).

The afternoon sessions in English and in French will be held concurrently.

English Session:

2.30 p.m., Symposium — "The Patient needs a Nurse"; representatives from all Sections will participate.

French Session:

2.30 p.m., "The problems of Private Duty and the means of their solution" — Mademoiselle Claire Godbout, R.N., Diploma in Journalism.

"Plans for the Tercentenary celebrations"—Mr. Léon Trepanier, Director Général, Montreal Tercentenary celebrations (1942).

The evening sessions in English and in French will be held concurrently.

English Session:

8.30 p.m., Dr. M. R. Harrower, Ph.D., Lecturer in Clinical Psychology, Montreal Neurological Institute and McGill University, will speak on a topic to be announced later.

Dr. George D. Kilpatrick, D.D., Principal of the United Theological College, will speak on a topic to be announced later.

French Session:

8.30 p.m., "Provincial Public Health" — Dr. Jean Grégoire, C.P.H., Deputy Minister of Health, Quebec Provincial Government.

"Towards the Fountain of Youth, (para-scientific conference on the causes of old age and methods of prevention) — Dr. Antonia Barbeau, Ph.D., titular professor in neurology, University of Montreal; Chief of services for mental and nervous diseases at Hôtel-Dieu; Consultant in neurology, Montreal Neurological Institute.

THE S. R. N. A. ANNUAL MEETING

In anticipation of balmy weather, roads in good condition and a large representation from outlying districts, the twenty-third Annual Convention of the Saskatchewan Registered Nurses Association is to be held at the Saskatchewan Hotel in Regina, the latter part of May. Advance information gives promise of an interesting programme and Saskatchewan nurses are looking forward with much pleasure to welcoming Miss Nettie Fidler of the University of Toronto School of Nursing, as a guest speaker. Miss Fidler's varied experience and recent travels ensure some inspiring sessions.

A supervisory stewardess on the Trans-Canada Air Lines has kindly promised to spend a day at the Convention and to share with those present some of the thrills of flying.

Other interesting events are to be included. Further details regarding the programme and the exact date of the meeting will be announced in the next issue of the *Journal*.

Nurses of Saskatchewan — Plan now to be in Regina in May!

Teacher, Physician, and Friend

On New Year's Day 1940, at the height of his career, Harry Clifton Burgess died — yet he lives and will continue to live in our hearts, the hearts of those who revered him for his exceptional abilities and skills, and who loved him for his innate kindness and loyalty. Thus we cherish a vivid and lasting memory of him who was at once our beloved teacher, kind physician, and loyal friend.

As a teacher (for he taught student nurses for more than thirty years) we remember Dr. Burgess for the brilliance of his lectures, each a classic in its simplicity and adherence to sound facts and principles, and we have since learned well the wisdom of his precepts and the logic of his reasoning. We remember, too, his keen sense of humour and appreciation of the ridiculous — yet, for all the laughter we enjoyed at his lectures, never once did he allow us to forget the seriousness of his text. We remembered what he taught us — and he taught us well. He was, indeed, a brilliant teacher, yet his brilliance was never consciously exhibited, for he possessed, as well, the humility of the truly great.

We remember him for his kindness to us and his loyal support of nurses and nursing in general; he always took an interest in us and in our work and we are deeply grateful. His attitude toward us, whether as undergraduate or graduate nurses, was ever one of confidence and trust and one that inspired us to give of our best in his service. He had the rare and inestimable quality of creating in the patient's mind that same sense of complete confidence in the nurse which characterized his own attitude toward her; in this he proved himself to be a great psychologist, as well as a great physician — he knew the human body and he knew the human mind.

In times of sickness, his kindness to the nurses knew no bounds; he gave freely of his time, talent and skill, never sparing himself, to all who sought his advice — and their numbers are legion. He was our physician — *our* Dr. Burgess.

We mourn him as only those who have loved and served their fellow-men are mourned, but his memory will live in our hearts — the hearts of the nurses.

Obituaries

JANE MARGARET BIRD, (Maisie Currie) wife of Mr. Frederick George Bird of Calgary, died on March 4, 1940, at the Montreal General Hospital. Mrs. Bird was a graduate of the School of Nursing of the Montreal General Hospital and a member of the Class of 1924.

LILLIE ANN MORRISON died on February 21, 1940. Miss Morrison graduated in 1924 from the School of Nursing of the Nicola Valley General Hospital, Merritt, B. C. For many years she was a valued member of the nursing staff of the Trail-Tadanac Hospital.

JESSIE MORRISON died on February 26, 1940, at her home in Blues' Mills, Inverness County. Miss Morrison was a graduate of the School of Nursing of the City Hospital, Sydney, Nova Scotia, and her passing is deeply mourned by the members of the nursing profession.

STUDENT NURSES PAGE

Today was the Day!

JANE E. MCLACHLAN

Student Nurse

School of Nursing, Toronto Western Hospital

Last night in the preliminary students' quarters, fresh uniforms, immaculate in their blue and white, hung expectantly, shining shoes acquired an almost unbelievable polish and anxious eyes inspected hose for signs of that last minute "run" which would plunge the wearer into disgrace. There may have been some surreptitious whispering and visiting after "lights out", but did you go calmly to sleep the night before your reception into your School as a Junior Nurse? No longer will the jovial "cardiac" in bed 17 greet you with a "Good-morning, Curly-top", nor the junior interne, looking at your capless head remark loftily — "Send me a nurse, please!" How difficult upon such occasions to maintain professional dignity and equanimity.

The first milestone is reached. Preliminary days are over. Is the glance back just a bit regretful? Arduous days — yes, but not purposeless. No other months of training, perhaps no other months of life will be so crowded with new experiences and adjustments, with laughter and tears, with elation and discouragement, with failure and success. It is with a sense of growth and achievement that we face new responsibilities.

Routine duty loses its monotony when increased efficiency and capability is the reward; discipline is not harsh and unjust when it develops self-control and respect for authority; contact with those we serve, with whom we serve and under whom we serve may have been pleasant and unpleasant, but it has taught us tolerance, patience and sympathy. We have learned to "live with others and like it."

It may have been the candle-lit reception room, the music, the long table with its row of crisp, new caps or the reading by our Principal of Mrs. Rhynas' dedicatory words which struck a new note of responsiveness:

The prize for which you yearn will be won only by your day being replete in worthy application, the laurels won will be through

"Bonnie Western" and her foster mothers.

going the second mile in service, application, tact, grace and dignity — with high purpose and courage ever your guide, abstinence from any habit or act which will not help you carry the seal and sacredness of this high calling to its best heights . . . That magnificent harness of routine which enables us to mould ourselves with the manifold duties, obstacles and requirements with a sublime dignity and efficiency is a priceless master if we but bend to and cheerfully accept the lessons we receive in the path of obedience. Never fear to bring the sublimest motive to the smallest duty and the most infinite comfort to the smallest trouble. In so doing, you will find reward at every turning of the road.

The voice ceased. Our Principal turned toward us and with a smile that seemed especially our own, called on our "Big Sisters" to place on each head the cap which has assumed a new meaning and dignity. It is the symbol of the School, signifying faith in our integrity of purpose. Smiles and congratulations thrilled us, for they are all here this morning — teachers, supervisors and head nurses, remembering the day when they stood where we stand now, as they extended an encouraging hand Now it is our School too!

What do we give? Up to this point, we have been recipients. Now, with excitement running high, we become donors not only of loyalty and obedience but of tangible evidence of our appreciation of and interest in our school. Although not original with us, we adopted the precedent set by a Junior class which wished to leave some permanent gift with their Alma Mater and several valuable reference books were placed in the library. Enthusiasm grew. Small class functions provided part of the funds for a long coveted motion picture camera. Still others resulted in the appearance of a lighted bulletin board and a globe in the library, and placed copies of *The Canadian Nurse* on several floors of the residence.

Now it was our turn! "What can we do?" became the all-important question. Then we learned that when a Mothers' Class was being demonstrated to a group of refresher course nurses, we did not have a baby — that is a practice one. We had to borrow. Now, a borrowed baby may be very sweet, but it isn't like one of your own. It had to be returned. How reluctantly the obstetrical department gave up the infant who was always smiling, didn't try to talk at the same time as the demonstrator and who really didn't care how often it was bathed in one morning — just for practice. Here was our answer!

So, this morning, complete from her shining head to her tiny feet, from the last dainty garment in her layette to the identification beads around her neck, "Bonnie Western" becomes the child of the Toronto Western Hospital with twenty-nine foster mothers to guarantee her well-being. Today was the day!

Victorian Order of Nurses for Canada

Miss Beatrice Creasy, Junior Assistant Superintendent, Victorian Order of Nurses for Canada, recently spent a month in New York with the Metropolitan Life Insurance Company familiarizing herself with the technique for professional reviewing of Metropolitan Life Insurance Company case records. While in New York, Miss Creasy visited the offices of the National Organization for Public Health Nursing and the American Public Health Association.

The following are the staff appointments to, and resignations from, the Victorian Order of Nurses for Canada:

Miss Catharine Maddaford, graduate of the School of Nursing of St. Michael's Hospital, Toronto, and of the course in public health nursing, University of Toronto, has been appointed to the York Township staff.

Miss Luella Harrigan, graduate of the School of Nursing of St. Joseph's Hospital, London, and of the course in Public Health Nursing, University of Western Ontario, has been admitted to the Guelph staff.

Miss Essie Kain, a former Victorian Order nurse, has been re-admitted to the Order and appointed to the staff at Weston, Ontario.

Miss Audrey Price has been transferred from the Timmins branch and is now in charge of the branch at North Vancouver, B. C.

Miss Margaret Anderson has been transferred from the Guelph staff to take charge of the recently organized branch at Campbellton, N. B.

Miss Elizabeth Riddell has been transferred from the Vancouver staff and is now in charge of the recently organized branch at North Vancouver.

Miss Winnifred McQuaid has been transferred from the Halifax staff to the Moncton staff.

Miss Florence Greenaway has been transferred from the Walkerton branch to the position of nurse-in-charge of the branch at Timmins, Ont.

Miss Helen Saunders has been transferred from the York Township staff and is now in charge of the branch at Walkerton, replacing Miss Greenaway.

Miss Mary Gowen has resigned from the North Vancouver branch to be married.

Miss Beulah Fry has resigned from the Weston branch to accept a position as school nurse in Kingston, Ont.

Mrs. MacKinnon (née Wallace) has resigned from the Moncton staff.

Ontario Public Health Nursing Service

In Thorold Township, Welland County, the school sections have united to provide a health service on a township-wide basis. *Miss Adele Elizabeth Rogers* (Toronto General Hospital, and University of Toronto public health nursing course) received the appointment as school nurse and began her work in January.

Mrs. Kathleen Cowie (née Merrett), Hamilton General Hospital, and University of Toronto public health nursing course, was recently appointed by the Board of Freeport Sanatorium, Kitchener, to carry out a tuberculosis nursing programme in the County of Waterloo.

In Teck Township (Kirkland Lake) a fourth member has been added to the nursing staff and *Miss Winifred Walker* (Toronto Western Hospital and University of Toronto public health nursing course) has been promoted to the position of supervising nurse. The new staff member is *Miss Elsie Franks* (Toronto General Hospital and University of Toronto public health nursing

course), formerly with the Victorian Order at New Liskeard.

Mrs. Bertha Waldron Young resigned as public health nurse for Cochrane at the end of the year. She has been succeeded by *Miss Jessie Frazer Smith* (Toronto General Hospital and University of British Columbia public health nursing course).

Miss Ruby Cronk (University of Toronto and Toronto General Hospital four-year course), who has been on the staff of the Stratford Board of Health, resigned in February to accept a position with the Hydro-Electric Power Commission of Ontario at Fraserdale.

Mrs. Sara Verrall, a graduate of the School of Nursing of the Kingston General Hospital and an approved school nurse, has returned to the position she formerly held with the Board of Health, Etobicoke Township (Islington). *Miss Beulah Fry* (Toronto General Hospital, and University of Toronto public health nursing course) has succeeded her on the staff of the Kingston Board of Education.

Miss Matilda Miller, of East York Township Board of Health nursing staff who recently met with an accident, is improving. During her absence, *Mrs. Blanche Gordon* (Toronto Western Hospital, and University of Toronto public health nursing course) is relieving.

Miss Essie Kain (Toronto Western Hospital, and University of Toronto public health nursing course) resigned as public health nurse with the Owen Sound Board of Health in February. She has succeeded Miss Fry, as Victorian Order nurse in Weston.

WANTED

Wanted by the Penticton Hospital Board, a graduate nurse experienced in and holding a certificate for a post-graduate course in surgery.

Apply to:

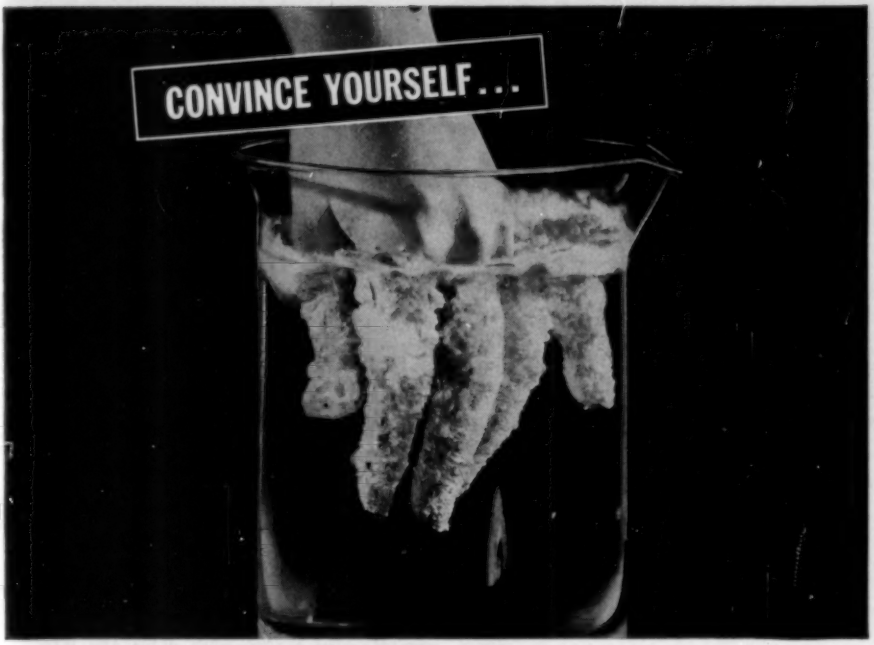
THE SECRETARY,
Penticton Hospital Board,
Penticton, B. C.

REFRESHER COURSES

The University of Toronto School of Nursing is offering two Refresher Courses from May 13 to 18 inclusive. *Course A* deals with various aspects of hospital social work and the following lecturers will participate: Dr. W. Boyd, Professor S. J. Jaffary, Miss B. M. Finlayson, Mr. J. W. Ketchum, (all of the University of Toronto); Dr. G. H. Agnew, director of the Hospital Division of the Canadian Medical Association. Round table conferences will be conducted by Miss M. K. Kniseley, director, Hospital Social Service, Toronto General Hospital, and Miss E. Fraser, superintendent, Hospital Health Service, Department of Health, Toronto.

Course B deals with administrative problems in public health nursing practice. The following lecturers will participate: Dr. D. V. Currey, Medical Officer of Health, St. Catharines; Miss M. W. Sheahan, director, Division of Public Health Nursing, State of New York; Dr. A. H. Sellers, medical statistician, Ontario Department of Health. Round table conferences will be conducted by Miss E. Moore, Chief Nurse, Ontario Department of Health; Miss E. Cryderman, superintendent, Toronto Branch, Victorian Order of Nurses; Miss E. Hickey, director, Division of Public Health Nursing, Department of Public Health, Toronto.

The registration fee for one course is $5.00, and for the entire week, $8.00. Full particulars may be obtained from the Secretary, School of Nursing, University of Toronto.



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NEWS NOTES

ALBERTA

EDMONTON:

The Edmonton District Number 7 of the Alberta Association of Registered Nurses recently held a meeting with about one hundred members in attendance. The president, Miss Agnes Macleod, was in the chair. The by-laws were discussed and several revisions made. Segt. Major Perkis addressed the group on "Air raids and the Nurse" explaining the action of different gases and method of treatment.

Royal Alexandra Hospital:

At a recent meeting of the Alumnae Association of the Royal Alexandra Hospital plans were made for the banquet in honour of the Graduating Class. The Association donated a sum of money to be used to purchase new equipment for the students' chemistry laboratory. Mrs. Balmer Watt gave us a delightful character study of Father Lacombe, the pioneer priest of Alberta.

LETHBRIDGE:

At a meeting of the Lethbridge Graduate Nurses Association, held recently at the Nursing Mission, it was unanimously agreed that the Association affiliate with the Alberta Association of Registered Nurses and become a district of the Provincial Association.

The Lethbridge Graduate Nurses Association has agreed to work as an auxiliary to do the sewing, supervise supplies necessary for the up-keep of the Lethbridge Military Hospital. The Private Duty Nurses have donated $10.00 from their funds, towards this Red Cross work. Miss Shelton and Mrs. Reid were appointed to oversee the work and Mrs. Perdu volunteered to visit the hospital twice a week.

The L.G.N.A. regrets that both Miss Margaret Doyle and Miss Marie McCartney have been bereaved of their respective fathers. Sympathy is extended to them.

Miss Ann Bourgault has accepted a position on the staff of St. Michael's Hospital. She is a graduate of St. Paul's Hospital, Saskatoon.

Miss Olive Cardwell (Galt Hospital) has accepted a position as office nurse for Dr. Wiens, at Taber, Alta.

Married: Recently, Miss Dorothy Young (Galt Hospital) to Mr. J. D. Wray.

Married: Recently, Miss Marjory D. Palmer (Galt Hospital) to Sergt. Harold Holberton, 20th Anti-Tank Battery, C.A.S.F.

BRITISH COLUMBIA

VANCOUVER:

The Travelling Educational Unit composed of Miss F. H. Walker, and Miss Laura Holland, will tour Vancouver Island during March and visit a number of nursing groups during that week. Plans are being considered for a Refresher Course in "Supervision" to be held at some date to be arranged during the summer of 1940. Examinations for title and certificate of Registered Nurse will be held in four centres on April 16, 17, and 18, 1940.

The Public Health Section of the Registered Nurses Association of British Columbia recently held a dinner at the Hotel Vancouver. The guest speaker was Lawrence E. Ranta, M.D., D.P.H., assistant professor, Department of Bacteriology and Preventive Medicine, University of British Columbia, and research assistant for the Connaught Laboratories (Western Division), who gave a very interesting address on the modern conception of scarlet fever. This full text will appear in an early issue of the *Journal*.

Vancouver Graduate Nurses Association:

At the annual dinner of the Vancouver Graduate Nurses Association the guest speaker was Dr. Howard Spohn who said that if he had any criticism to offer to his own and the nursing profession it would be that the average doctor and nurse paid too little attention to the opportunities of broadening their general education. Dr. Spohn suggested that the lonely hours which all must face as a result of varying personal and family conditions could be made so much happier and friendlier if we had an appreciation of the literature of our own country. He referred to the nurses of the Scandinavian countries who are good nurses and apparently are also good students, as the average nurse spoke two or three languages fluently. He inferred also that they accepted the simpler things of life as did our own pioneer families in Canada. He feared we were becoming accustomed to luxuries and urged that we do not forget what we owe to our forbears who, in this essentially pioneer country, had not only been successful but had handed on much of their experience and tradition to this generation.

NELSON:

The Nelson Graduate Nurses Association, in co-operation with the Women's Hospital

Teammates

in Home Care of the Teeth

THIS NEW EFFICIENT TOOTHBRUSH

The Squibb Angle Toothbrush is easy to handle — adaptable and efficient. It affords greater accessibility in cleaning difficult-to-reach areas.

Two Angles Responsible for GREATER EFFECTIVENESS

The "Mouth-Mirror" Angle brings back molars within easy reach of brush head. Also permits effective brushing of the lingual surface of incisors.

The "Jog" Angle makes it possible to keep the brush head in virtually a horizontal position for cleaning between the teeth.

OTHER FEATURES

Thin metal shank is of special rust-resisting alloy.

High quality natural bristles—three rows, six tufts to a row. Two degrees of stiffness —hard and medium.

Recommend the Squibb Angle Toothbrush. Its exceptional cleansing efficiency will please your patients. It is suited to all types of mouths.

THIS SAFE, EFFECTIVE DENTIFRICE

Squibb Dental Cream provides the essential qualities of a product intended for use by your patients at home to supplement your scientific care. It cleans teeth effectively yet with absolute safety.

Squibb Dental Cream is free from grit, astringents, or other irritating substances. It contains nothing which might be harmful to the teeth, to the mucous membranes of the mouth, or even to the stomach if swallowed. Its content of milk of magnesia is an aid in neutralizing bacterial mouth acids. Patients who prefer powder will enjoy Squibb Tooth Powder. It provides the same scientific advantages as Squibb Dental Cream.

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Manufacturing Chemists to the Medical and Dental Professions Since 1858

Auxiliary, recently held a very enjoyable tea from which $100. was realized for the treasury. A novelty table and a lovely booth were an additional attraction. A musical programme was provided by the Nelson String Orchestra and several vocal numbers which added much to the pleasure of the occasion.

Miss Helen Randal, provincial registrar, was guest speaker at the regular December meeting of the Nelson Graduate Nurses Association. Miss Randal gave a very interesting outline of the nursing activities of the Province and of the Dominion.

Married: Recently, Miss Mary Norma Morrison (St. Paul's Hospital, Vancouver) to Mr. Charles P. Chevalier.

Married: Recently, Miss Blanche F. C. Cornwall (Royal Inland Hospital, Kamloops) to Mr. Raymond Penhale Claydon.

Married: Recently, Miss Pauline Alice Kerr (Vancouver General Hospital) to Mr. Frederick W. Simpson.

Married: Recently, Miss Eileen E. Bond (Vancouver General Hospital) to Mr. George Payne.

Married: Recently, Miss Bonnie C. E. Risa (Vancouver General Hospital) to Mr. Russell Paull.

MANITOBA

BRANDON:

Brandon Graduate Nurses Association:

The Brandon Graduate Nurses Association recently held their monthly meeting with thirty present, and the president, Mrs. D. L. Johnson, in the chair. Gratifying results were reported from a silver tea held at Mrs. Pierce's home, the proceeds of which are to be devoted to a special fund. A committee was named to arrange an item for the annual meeting of the M.A.R.N. to be held in April. The guest speaker, Dr. G. A. Little, gave a very interesting and informative address on advances in psychiatry. Mrs. Pierce thanked the speaker. The doctors' wives were in charge of the social hour.

NEW BRUNSWICK

SAINT JOHN:

A meeting of the Saint John Chapter of the N.B.A.R.N. was held recently with the president, Miss Florence Coleman, as chairman. The resignation of Miss Bernetta Vye as registrar was accepted with regret. Miss Sally Turnbull, convener of the education committee, was assisted by Miss Marion Myers and Miss Thelma Horton in giving a practical demonstration of modern nursing procedure. It was announced that the N.B.A.R.N. is again offering a scholarship for an academic course for nurses registered in this province who have senior matriculation standing. A period of silence was observed in memory of Lord Tweedsmuir.

Married: Recently, Miss Bulah Bartchard (S.J.G.H., 1931) to Mr. Donald McLean Colwell.

Married: Recently, Miss Alberta Doull (S.J.G.H., 1936) to Mr. MacLaren Roberts.

NOVA SCOTIA

HALIFAX:

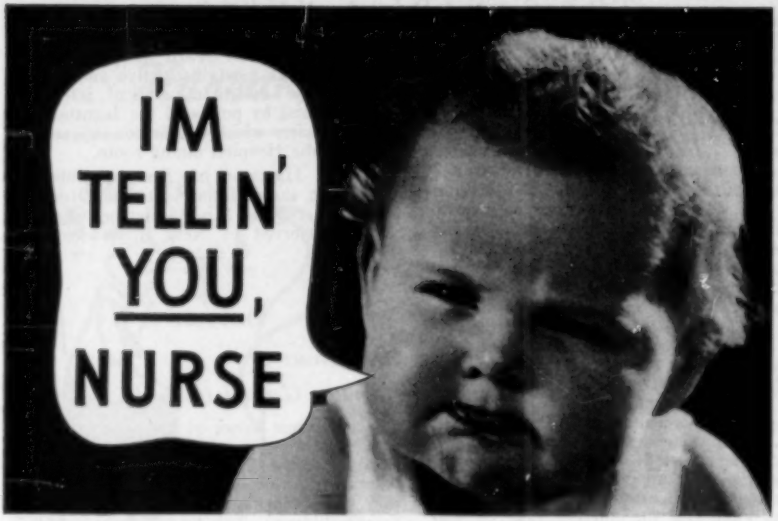
A recent meeting of the Halifax branch of the R.N.A.N.S. was held at the Children's Hospital with more than eighty nurses in attendance. Following the business session a very interesting address was given by Dr. N. Barrie Coward on "The care of the premature baby". A premature bed, improvised from a paper packing case, and a modern Hess Oxygen Therapy Premature Bed were exhibited following the lecture. The evening ended with a sing-song.

The third quarterly meeting of the Alumnae Association of the Children's Hospital was held recently. Committees were appointed to arrange for a rummage sale and for the re-union which is to be held in June, 1940.

NORTH SYDNEY:

A meeting of the Cape Breton Registered Nurses Association was held recently at the Hamilton Memorial Hospital, North Sydney, with the president, Miss Rhoda F. MacDonald, in the chair. An instructive lecture and demonstration was given by Dr. Meech assisted by two student nurses of the Hamilton Memorial nursing staff. The subject was duodenal depression by use of the Wangensteen apparatus. A splendid report of the Executive Meeting of Nova Scotia Registered Nurses Association held recently in Halifax, was presented by one of the councillors, Miss F. K. Anderson. Arrangements were discussed for the annual meeting which is to be held in Glace Bay in June, 1940. Delicious refreshments were served by the North Sydney nurses.

Miss Helen D. Young recently resigned her position as instructress of nurses at the Sydney City Hospital Training School and has returned to her home in Ontario.



"Us babies depend on YOU!"

Nurse . . . the instructions *you* give to new mothers can mean a great deal to babies. You can do so much good by impressing on mothers the importance of anointing their babies every day with Mennen Antiseptic Oil.

It has been proved that ordinary oils, such as olive and cottonseed oil —and most commercial oils—form a fertile field for bacteria. But Mennen Antiseptic Oil markedly *reduces* the surface bacteria on the skin.

The infant is notably susceptible to skin infections; it lacks resistance to the pyogenic organisms; the defense of its skin against bacterial invasion needs to be fortified. That is the function of Mennen Antiseptic Oil.

The Oil is pleasant to use, does not soil linen (washes out easily), leaves no greasy residue. It is not irritant, is self sterilizing and will not turn rancid. So urge mothers to use Mennen Antiseptic Oil on their babies *every day*.

THIS COUPON WILL BRING YOU SAMPLES

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Toronto, Ont.

Send me free professional samples of Mennen Antiseptic Oil and Mennen Antiseptic Borated Powder.

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ONTARIO

District 1

SARNIA:

District 1, R.N.A.O., recently held its annual meeting at the General Hospital, Sarnia. Miss Doris Shaw of Sarnia presided and sixty-four members were present. The invocation was given by the Rev. Father Phalen of St. Joseph's Parish, and the address of welcome by the Rev. W. R. Adams.

The treasurer's report showed a substantial balance in the bank. Reports of the sections were given and at the close of the session the nurses were guests of the Sarnia General Hospital Alumnae Association at a delightful luncheon.

At the afternoon session, his Worship Mayor Barnes welcomed the nurses and Dr. J. T. Biehn extended the welcome of the medical staff. Dr. F. G. S. Christie gave an interesting talk on recent developments in gynecology and obstetrics, and Miss Jean Cairns explained the nursing care of maternity patients.

Election of officers resulted as follows: Chairman, Miss Lorna Horwood, London; first vice-chairman, Miss Jessie Wilson, St. Thomas; second vice-chairman, Mrs. Constance Salmon, St. Thomas; secretary-treasurer, Miss Louise Steele, London; committee conveners: nurse education, Miss Margaret McPhedran, Sarnia; public health, Mrs. Florence Kennedy, Windsor; private duty, Miss Helen Parnell, Windsor; permanent education, Mrs. Hedley Smith, London; membership, Mrs. Mary Elrick, Sarnia; publications, Mrs. W. O. Soutar, London; enrolment, Mrs. Mary Fenner, Windsor; councillors: Miss Valerie Drope, Windsor; Miss Madalene Baker, London; Miss E. Orr, Chatham; Miss E. Precious, St. Thomas; Miss M. Thompson, Sarnia; Miss D. Williamson, Petrolia.

At the tea hour, the nurses were guests of the Sarnia General Hospital Alumnae Association.

Solos rendered by Mrs. W. G. Gray lent a charming note to the programme. Reports of the resolutions committee were presented by Miss Jessie Wilson.

Districts 2 and 3

BRANTFORD:

A general meeting of Districts 2 and 3 was held at the Brantford General Hospital recently with about one hundred nurses present. Interesting reports were received from the various sections and committees. Miss C. Jackson gave a clever interpretation of various phases of "Nursing Activities". An address by Mr. Ward Simpson on nature study was most instructive and enjoyable. Several delightful musical selections were rendered by pupils of the Institute for the Blind after which a delicious supper was served in the Hospital dining room.

Miss L. Harrigan has been appointed to the Guelph staff of the Victorian Order of Nurses to replace Miss Anderson who has been transferred to New Brunswick.

District 4

HAMILTON:

Hamilton General Hospital:

Miss Marnie Bruce of the Dale Community Centre was the guest speaker at a recent meeting of the Hamilton General Hospital Alumnae Association. Her address dealt very capably with the work of the Family Service Bureau, including a few case histories and an outline of the routine of this organization.

The meeting of the Association which was held on March 5 was conducted as a social evening to welcome the sixty-five new members who have joined the Alumnae during the past year. The meeting was well attended.

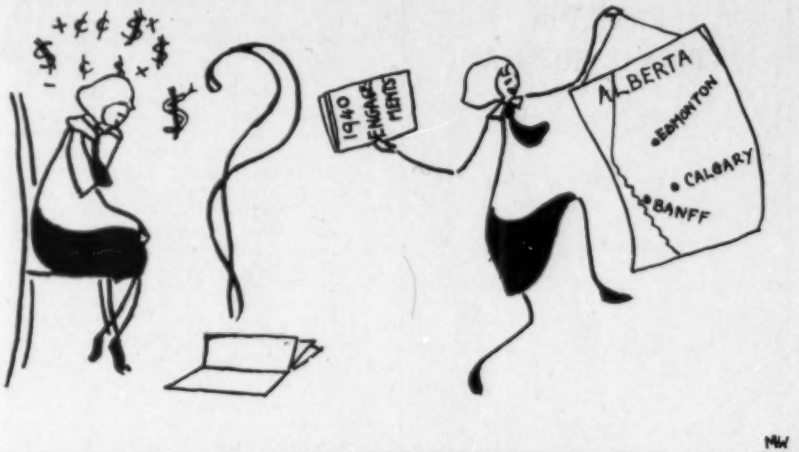
A group of nurses has volunteered to knit field comforts, in co-operation with the Ladies' Auxiliary to the R.C.A.M.C., for the 5th Field Ambulance. This group which has been active only since December last, has already turned in substantial supplies of rifle mitts, half mitts, scarves, wristlets, socks and pullovers to the Auxiliary.

District 5

TORONTO:

The spacious solarium of the Toronto Western Hospital was taxed to its capacity recently for the annual meeting of District 5, R.N.A.O. The chairman, Miss Irene Weirs, presided. Progress formed the keynote of the meeting, its theme being clearly interwoven in each and every report presented. Together, they depicted a year of most gratifying achievement. Interesting highlights may be found in the following excerpts: The chairman—"We review the work of this District for the year 1939, again reminding ourselves of our responsibility to the larger nurses' organizations and of the encouraging development and growth within our own group." The secre-

Hurrah, I'm off to Alberta!



Drawing by Mary Willis, student nurse, Class 1941 School of Nursing, Royal Alexandra Hospital, Edmonton

Calling all Alumnae Associations

Plan reunions for those of your members who are attending the Biennial Meeting of the Canadian Nurses Association in Calgary, June 24 to 29.

The time set for University Alumnae Association functions is the luncheon hour on Wednesday, June 26, and for Hospital Alumnae Associations the dinner hour, Wednesday evening, June 26.

When registering, look for a sign "Alumnae Associations". There you will find someone who has full information regarding various places suitable for the function you wish to arrange for your association. There you may also leave messages for your friends.

For further details write to Miss M. S. Fraser, chairman Alumnae Association Committee, Royal Alexandra Hospital, Edmonton, Alberta.

Make the Alumnae Association Corner Your Rendez-vous during the Convention

The Golden Jubilee
of the Training School of the

HAMILTON GENERAL HOSPITAL

June 5 to 7, 1940

●

Wednesday, June 5

1.00 p.m. Registration at Senior Residence.

3.00 p.m. Scenic Drive and Tea at Mount Hamilton Hospital, provided by the Women's Auxiliary.

7.00 p.m. Annual Alumnae Dinner, Royal Connaught Hotel; Guest Speaker: Miss Effie Taylor, President, International Council of Nurses; Dean of Nursing, Yale University.

●

Thursday, June 6

3.00 p.m. Reception and Garden Party — Open House. Board of Governors, Hamilton General Hospital. The evening session will be kept open for individual class reunions.

●

Friday, June 7

3.00 p.m. Graduation, McMaster University.

Speaker: The Hon. Albert Matthews, Lieutenant-Governor of Ontario.

9.00 p.m. Dance, Ball-Room, Royal Connaught Hotel.

tary — "There have been four executive and four general meetings during the year. Announcement of meeting cards sent to members totalled five thousand, seven hundred. Approximately one hundred other items of correspondence were dealt with by the secretary and about four hundred phone contacts." The treasurer — "Receipts during the year were $567.88, disbursements $301.09; the balance on hand $543.81." The membership convener — "Membership for 1939 was 1429, an increase of almost 400 over the preceding year." The convener of *The Canadian Nurse* Circulation Committee, in reporting results of a most promising campaign now in action — "Our objective is to secure at least one magazine for each three nurses. That would mean that the *Journal* was read by all." And so on throughout all the reports, the spirit of which may be found in the closing words of the chairman's address — "Our organization as we enjoy it today, is due to those who have laid the foundations, — ours to lift it to even greater successes in the future, and to hold fast to our very highest ideals."

The speaker of the evening was Dr. Stanley Ryerson, Dean of Medicine, University of Toronto, whose subject was "The Assessibility of Health." As an introduction to Dr. Ryerson's address, Miss A. M. Munn gave a brief outline of the personnel and the function of the Council of Nurse Education of which he is a member.

The officers elected for the coming year were: Chairman, Miss Alberta Bell; first vice-chairman, Miss Jean Mitchell; second vice-chairman, Miss Mabel Sharpe; secretary-treasurer, Mrs. Catherine Challener; committee conveners: public health, Miss Evelyn Van Lane; nursing education, Miss Florence Thomas; private duty, Miss Winnifred Worth; councillors: Miss Elsie Williams, Miss Mabel Wheeler, Miss Gladys Sharpe, Miss Laura Webb, Miss Gwladwen Jones, Miss Kathleen McNamara.

A very pleasant social hour followed the meeting.

Toronto East General Hospital:

Mrs. Ralph Day officially opened a tea held recently in the Nurses Residence by members of the auxiliary for Red Cross work of the Alumnae Association of the Toronto East General and Orthopedic Hospital. The tea tables were presided over by Mrs. J. Y. Ferguson, Mrs. Roy Malyon, Mrs. R. Hewson and Mrs. W. C. Gwins. Members of the auxiliary acted as assistants. The guests were received by Miss Ella McLean, assisted by Miss Ella Campbell,

president of the auxiliary, and Miss Bessie Jackson, social convener. An assortment of knitted articles were on display and a lucky draw was held. The proceeds are in aid of the Red Cross.

District 6

Belleville:

A meeting of Chapter A, District 6, R.N.A.O., was held recently at the Belleville Hospital following the meeting of the Alumnae Association. The chairman, Miss Bertram, presided. The programme was in charge of the private duty nursing section with Miss Lang as convener. Dr. Anderson, a member of the hospital medical staff spoke on the history and progress of surgery. It was most instructive as well as interesting. A delightful social hour followed.

Port Hope:

A meeting of Chapter B, District 6, R.N.A.O., was held recently at the General Hospital. Miss Gibb, who is the vice-president, presided in the absence of Miss Shaw, the president. Seventeen members were present. Mr. T. B. Friend gave a very interesting address on radium. Miss Polson moved a vote of thanks to the speaker. Refreshments were served by Miss Elliott and staff.

Married: Recently, Miss Gertrude Margaret May Blezard (P.H.G.H., 1936) to Mr. George William Ellsworth.

Peterborough:

The meeting of Chapter C, District 6, R.N.A.O., was held recently at St. Joseph's Hospital. Mrs. Rundle presided and ways and means of raising finances were discussed. It was decided that each member come prepared to give fifty cents at the next meeting. Miss L. Stewart was appointed as *The Canadian Nurse* representative. Miss Young was appointed to organize the Red Cross meetings to be held every Thursday night and Miss Rundle, supervisor of supplies. The Alumnae Associations of St. Joseph's and Nicholls Hospitals are to be approached and their help solicited. Twenty dollars will be given by the Chapter each year to cover travelling expenses to the Executive meetings of the District. Two

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Montreal General Hospital Scholarship

The Alumnae Association of the Montreal General Hospital School for Nurses offers a scholarship of $300.00 to a member of the Association, to assist her in undertaking, during the Session 1940-41, one of the regular courses given in the School for Graduate Nurses, McGill University, Montreal. The courses offered are: Teaching and Supervision in Schools of Nursing; Administration in Hospitals and Schools of Nursing; Public Health Nursing; Administration and Supervision in Public Health Nursing.

For further information, and the necessary forms, please apply to Miss Mary S. Mathewson, Montreal General Hospital. Completed applications should be returned not later than June 1, 1940.

THE MANITOBA NURSES' CENTRAL DIRECTORY
PHONE 72 151
214 BALMORAL STREET
WINNIPEG, MAN.

interesting case studies were presented by Miss Hollingeworth and Miss Mullen, students of St. Joseph's Hospital. An interesting demonstration of a croup tent and steam apparatus was given. A pleasant social hour followed.

Belleville General Hospital:

A meeting of the Alumnae Association was held recently with the president, Miss M. Fitzgerald, presiding. It was decided to continue the meetings on Tuesday of each week for Red Cross work. Miss Eva Meeks (B.G.H., 1935) is taking a four months post-graduate course in surgery at the University Hospital, Philadelphia. Miss Bessie Soutar (B.G.H., 1924) Victorian Order nurse attended the refresher course in obstetrics recently held at Toronto University.

LINDSAY:

Ross Memorial Hospital:

One of the highlights of the social season in Lindsay took place recently when the Nurses Alumnae of the Ross Memorial Hospital held their annual "at home". Guests were present from many outside points as well as Lindsay. The guests were received by Miss Ethel Reid, superintendent of the Ross Memorial Hospital and honourary president of the Almunae Association, and by Miss Flora Moffat, of Fenelon Falls, president of the Association. The dance proved a great success financially as well as socially.

DISTRICT 7

KINGSTON:

A meeting of the Kingston Chapter, District 7, R.N.A.O., was held recently at Kingston General Hospital. Dr. E. Robertson gave a most interesting talk on midwifery in Scotland. Dr. Robertson came from Scotland last fall to join the staff of Queens University as professor of obstetrics and gynecology.

The Alumnae Association of the School of Nursing, Kingston General Hospital, recently served a delightful supper to its members. Committees were chosen to purchase a silver tea service on which tickets will be sold. The war work committee reported 68 pairs of pyjamas ready for the Red Cross Society. Since the beginning of the war the alumnae members have given one night each week to making supplies for the soldiers.

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Married: Recently, Miss Mary Caroline Bird (K.G.H., 1933) to Mr. Reginald Robinson.

Married: Recently, Miss Emily Davis (K.G.H., 1932) to Mr. Sanford Kyle.

Ontario Hospital:

A delightfully arranged tea was held in the Nurses Residence, Ontario Hospital, in honour of Miss Edith Corkey (O.H., 1933) whose marriage to Mr. Lawrence McAvoy took place recently.

The student nurses recently entertained the graduate nurses at a very successful skating party held in the spacious rink at the hospital. A sing-song, led by the male nurses, closed a very fine evening. The party was under the management of the junior nurses and it was a great success.

Miss Evelyn Henderson has been transferred to the Ontario Hospital, New Toronto. Miss Norah Haley has been transferred from the Ontario Hospital, New Toronto, to the Ontario Hospital, Kingston. Miss Charlotte Rochfort has been trans-

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ferred from the Ontario Hospital, Whitby, to the Ontario Hospital, Kingston.

District 8

Ottawa:

Ottawa General Hospital:

Miss May Landreville was re-elected president of the Alumnae Association of the Ottawa General Hospital when gratifying reports were presented at the annual meeting. The following officers have also been elected to serve during the coming year: Honourary president, Rev. Sister Flavie Domitille; vice-presidents, Miss Alice Proulx and Miss Joan Stock; secretary-treasurer, Miss Lucille Brule; membership, Miss Irene Rogers; councillors: Rev. Sister Flavie, Miss Rose Therien, Miss Jeanne LaRochelle, Miss Audrey Clark, Mrs. A. B. Kavanagh and Miss Marion Prindiville. Representatives are : central registry, Miss Florence Nevins, Miss Lillian Keeney, and Miss M. Landreville; to the D.C.C.A., Miss Frances Lyons; to *The Canadian Nurse*, Miss Joan Mulvihill. Miss Bernadette Legris is the convener of the sick visiting committee.

Miss Yvonne Donegan (O.G.H., 1939) has accepted a position on the staff of the International Nickel Company Hospital at Copper Cliff, Ont.

Miss Claire Lamoureux (O.G.H., 1938) has been appointed to the staff of the Massachusetts General Hospital.

Married: Recently, Miss Eleonore Cossette (O.G.H., 1940) to Captain P. J. Maloney, R.C.A.M.C.

Married: Recently, Miss Jeanne Beaudry (O.G.H., 1938) to Dr. T. A. Breton.

Married: Recently, Miss Norah MacNamara (O.G.H., 1938) to Staff Sargeant Brady Richard Long, R.C.M.S.C.

Married: Recently, Miss Anne Boland to Mr. Ernest Ryan.

Married: Recently, Miss Irene Delorme (O.G.H., 1937) to Sargeant D'Amour, R.C.A.S.C.

District 9

Sudbury:

The Sudbury Chapter, R.N.A.O., recently held a meeting with fourteen members and six non-members present. Rev. Sister Superior spoke briefly on *The Canadian Nurse* and in future an article will be read and discussed at each meeting. The student nurses of St. Joseph's Hospital put on an entertaining skit, entitled "The Capping," under the direction of Miss Riordan.

NORTH BAY:

At a recent meeting of the North Bay Chapter, R.N.A.O., a letter was read from Miss A. McGregor suggesting projects for the educational meetings and discussion from the current nursing magazines. A committee was formed to discuss the articles and assign the subjects for each month.

Miss K. Delong and Miss R. Taylor attended the refresher course in obstetrical nursing at the School of Nursing, University of Toronto.

TIMMINS:

The Timmins Chapter, R.N.A.O., extended an invitation to St. Mary's Nurses Association to be present at their meeting when Miss Jean Thompson, social worker, was the guest speaker.

GRAVENHURST:

Dr. M. B. Wellwood addressed the Gravenhurst Chapter, R.N.A.O., on the subject of deficiency diseases and the value of a high vitamin diet in their treatment. Miss S. Bird reviewed *The Canadian Nurse* stressing the importance of increasing subscriptions.

QUEBEC

Montreal General Hospital:

An historic meeting of the Alumnae Association of the Montreal General Hospital School for Nurses was held in the Residence on Thursday evening, February 22, the fiftieth anniversary of the founding of the School by Miss Livingston. Early in 1939 plans were made to celebrate this event in June 1940 by a reunion of all graduates and by appropriate festivities; but, owing to the present condition of world affairs, it was deemed advisable to cancel those plans and to prepare a special programme for the meeting to be held on February 22, the anniversary of the actual date of the founding of the School.

Over four hundred graduates were present, representing every Graduating Class from 1892 to the present time. The Board of Management of the Hospital was represented by Mr. A. E. Ogilvie, Mr. A. D. Anderson, Col. W. Leggat, and Mr. H. J. Symington. The Medical Board was represented by the chairman, Dr. S. Hanford McKee; the Internes Society of the Mont-

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real General Hospital by Dr. Turcot and Dr. McLennan.

The president of the Alumnae Association, Miss Mary S. Mathewson, presided and in a few well-chosen words welcomed the graduates and the other guests. She paid high tributes to Miss Livingston, the founder of the School; her successor, Miss S. E. Young; and Miss Mabel K. Holt, the present superintendent of nurses. Special mention was also made of the long and valuable service rendered to the Hospital by Miss F. E. Strumm. Miss Mathewson then introduced two student nurses, Miss Margaret Browne, wearing the uniform of 1892, and Miss Eileen Sherlock, wearing the modern uniform of 1940. Several members of the early Graduating Classes were present—among them Miss Jessie McGregor, a member of the Class of 1892. To the great delight of the audience a number of them gave very interesting and amusing accounts of their work in the wards. These included Miss Annie Colquhoun and Mrs. Pearson (Miss Seaton), of the Class of 1892; Miss Henrietta Dunlop of the Class of 1893; Mrs. J. A. Henderson (Miss V. Hersey), of the Class of 1894; Miss G. Colley and Mrs. Dunfield (Miss Lepoidevin), both members of the Class of 1895. Miss Jennie Webster, O.B.E., who was night superintendent for thirty-three years, came from Winnipeg especially for the occasion and received a hearty welcome.

The internes of those early days, now celebrated surgeons and medical men, internationally known, also spoke briefly. Among them were Dr. H. S. Birkett, Dr. F. G. Finley, Dr. W. F. Hamilton, Dr. A. T. Bazin, Dr. C. F. Martin, Dr. A. H. Gordon, Dr. W. G. Turner, Dr. H. D. Hamilton, and Dr. John Spier. They all paid tribute to the work of the various nurses with whom they had come in contact in the early days of the School, and to the high standard set and maintained by these women which is still being carried on by the present nursing staff. Special reference was made to Dr. F. G. Shepherd, who was intimately connected with the progress of the Hospital and instrumental in obtaining the services of Miss Livingston as superintendent of nurses. Great praise was given to the first Operating Room Supervisor, Nurse Alicia Dunn, and to her successor, Miss Nora Tedford, who held this position with conspicuous success for twenty-one years. Dr. C. A. Peters, Dr. C. C. Gurd, and Dr. E. S. Hard-

ing, all of whom were internes in those early days, were also present.

Among the guests were the following: Dr. Maud Abbott; Dr. Lorne Gilday, superintendent of the Western Division; many members of the Medical Board; Miss Edith Rayside, O.B.E., (an honourary member of the Alumnae Association); Mrs. P. Nobbs and Miss D. Shepherd, (daughters of Dr. F. G. Shepherd); Miss Jean S. Wilson, Executive Secretary of the Canadian Nurses Association; Miss Ethel Johns, editor of *The Canadian Nurse*.

After Dr. H. E. MacDermot had shown some very interesting historical lantern slides a delightful reception was held at which the guests had the opportunity of meeting one another and of viewing the very fine historical exhibit.

Great credit is due to Miss Martha Batson who was in charge of the programme for the evening.

—C. M. WATLING

Montreal General Hospital:

Miss F. E. (Beth) Miller has succeeded Miss McDumuough in the M.G.H. Dental Clinic.

Married: Recently, Miss Jean W. Elliott (M.G.H., 1937) to Mr. Keith R. J. Horner.

L'Hôpital Notre-Dame:

The annual meeting of the Association of Registered Nurses of Notre-Dame Hospital, was held at the Nurses Residence. After the reading of the reports and adoptions of motions, five new members were elected to the council, in place of Misses Evelyne Gauvin, president; Rose Desrosiers, treasurer; Marie-Josèphe Ouellette, Jeanne Léveillé and Cécile Fréjeau, councillors, who resigned their office.

The members of the new council are: Miss Eva Merizzi, president; Miss Cécile Lamarche, first vice-president; Miss Marie-Anna Beaumont, second vice-president; Miss Marcienne Bazin, secretary; Miss Odette Whissell, corresponding secretary; Miss Pauline Sauriol, associate secretary; Miss Lucienne Courtemanche, treasurer; and Misses Antoinette Denoncourt, Marcelle Gagnon and Gilberte Roy, councillors.

School for Graduate Nurses, McGill University:

Miss Winnifred Cooke (Teaching, 1926) has been appointed in charge of the Teach-

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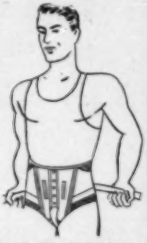

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ing Department of the Ottawa Civic Hospital. Miss Gwenllian Spriggs (Public Health, 1937) has recently been appointed to the Metropolitan Life Insurance Company nursing staff in Fort William. Miss Rosamond Lamb (Teaching and Supervision, 1939) has been appointed assistant superintendent of Nemouras Foundation Hospital, Wilmington, Delaware, U. S. A.

Among recent visitors to the School are: Miss Anna K. Bennett (Teaching and Supervision, 1939) and Miss Laura Lambe (Teaching and Supervision, 1936) who has recently returned from England.

Married: Recently, Mrs. Grace Burton (Teaching and Supervision, 1937) to Lieut. M. R. Dale.

QUEBEC:

Jeffery Hale's Hospital:

At a recent meeting of the Alumnae Association of the Jeffery Hale's Hospital, Miss Macdiarmid, B.H.S., Dietitian of Jeffery Hale's Hospital, gave a very interesting address on diets for different diseases, special mention being made of the change in the diabetic diet being much more palatable and offering a greater variety. Our March meeting brought us another very interesting illustrated lecture by Miss H. Boswell, on the life of Labrador.

SASKATCHEWAN

SASKATOON:

A Refresher Course was held in Saskatoon during March under the convenership of Miss Edith Amas. The programme was varied and was planned to interest nurses in the different fields.

Saskatoon City Hospital:

The graduates of the School of Nursing of the Saskatoon City Hospital recently held an enjoyable membership and guest tea in the Nurses Residence. Musical selections and a short skit, "The Cornfed Baby," composed an enjoyable programme.

Married: Recently, Miss Dorothy May Swan (S.C.H., 1938) to Mr. Andrew Lovick.

Married: Recently, Miss Helen James (S.C.H., 1938) to Mr. Leslie Lobb.

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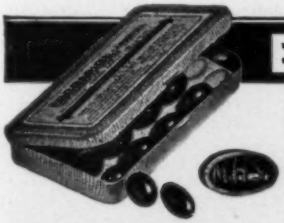

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REGISTRATION OF NURSES
Province of Ontario

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EXAMINATION
ANNOUNCEMENT

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An examination for the Registration of Nurses in the Province of Ontario will be held on May 28th and 29th.

Application forms, information regarding subjects of examination and general information relating thereto may be had upon written application to:

ALEXANDRA M. MUNN, Reg. N.,
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OVERSEAS NURSING SISTERS ASSOCIATION

Montreal Unit:

The Montreal Unit, Overseas Nursing Sisters Association of Canada, have sent $50. to the Consul-General of Finland in Montreal. This sum is to be given to the Finnish Nurses Association, at Helsinki.

Toronto Unit:

A Welfare Fund was started for the benefit of Nursing Sisters which it is hoped will become an established Trust Fund worthy of building and donations for a most worthwhile cause.

The Toronto Unit of the Overseas Nursing Sisters Association has elected the following to serve on the Executive Committee for the coming year: President, Miss Isabel McEwen; vice-president, Miss Mary Sunley; corresponding secretary, Miss Pearl Morrison; recording secretary, Miss Edith Rogers; treasurer, Miss Edith Whitlam; executive council: Miss Mary Lovering, Miss Marjory Gardner, Miss Alice Grindlay, Mrs. A. P. Hart (N/S K. Creighton), Mrs. James (N/S Helen Drummond), Miss Mary McNaughton, Mrs. Mitchell (N/S Maude Ellis), Mrs. George Sherritt (N/S K. Scott), Mrs. Harry Shields (N/S Cecil Oatman), Mrs. McQueen (N/S "Scottie" Ross).

Vancouver Unit:

The annual meeting of the Vancouver Unit of the Overseas Nursing Sisters Association of Canada was held recently at Shaughnessy Military Hospital, with the president, Mrs. A. W. Hunter, in the chair. Reports showed the outbreak of war to have quickened interest in the Association throughout Canada. Locally the members have been helping in various forms of Red Cross work. Funds raised have been sufficient to provide the members with wool for knitting and to maintain a gift chest at Shaughnessy Hospital.

The following is the list of officers elected for the coming year: President, Miss H. Stark; vice-president, Miss E. Cameron; secretary, Miss K. Panton; treasurer, Miss D. Oliver; social convener, Mrs. H. Hadley; membership, Miss H. Rice; press, Miss E. Lumsden; visiting, Miss M. Duffield; and executive: Miss O. Bentley, Miss M. Steele, and Mrs. D. D. James.

A social hour followed, and a hearty vote of thanks was extended to Dr. T. Bain and Miss Alice Turner for their hospitality.

Official Directory

International Council of Nurses

Acting Executive Secretary, Miss Calista F. Banwarth, 310 Cedar Street, New Haven, Connecticut, U. S. A.

CANADIAN NURSES ASSOCIATION

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Honourary Treasurer ..... Miss A. J. MacMaster, Moncton Hospital, Moncton, N.B.

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Numerals preceding names indicate office held, viz: (1) *President, Provincial Nurses Association:* (2) *Chairman, Nursing Education Section;* (3) *Chairman, Public Health Section;* (4) *Chairman, Private Duty Section.*

Alberta: (1) Miss Kate S. Brighty, Administrative Building, Edmonton; (2) Miss J. Davidson, Royal Alexandra Hospital, Edmonton; (3) Miss M. Staley, 18 Arlington Apts., Edmonton; (4) Mrs. M. Tobin, 385-4th St., Medicine Hat.

British Columbia: (1) Miss M. Duffield, 1675 10th Ave., W., Vancouver; (2) Miss A. S. Cavers, Vancouver General Hospital, Vancouver; (3) Miss F. Innes, 1922 Adanac St., Vancouver; (4) Mrs. J. F. Hansom, 1178 Esquimalt Ave., West Vancouver.

Manitoba: (1) Miss Evelyn Mallory, Children's Hospital, Winnipeg; (2) Miss F. Roach, St. Boniface Hospital, St. Boniface; (3) Miss A. McKee, 604 Medical Arts Building, Winnipeg; (4) Miss T. Greville, 797 Broadway, Winnipeg.

New Brunswick: (1) Mrs. G. E. van Dorsser, Health Centre, Saint John; (2) Sister Corinne Kerr, Hotel Dieu Hospital, Campbellton; (3) Miss A. Burns, Health Centre, Saint John; (4) Miss Myrtle E. Kay, 21 Austin St., Moncton.

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Ontario: (1) Miss C. E. Brewster, General Hospital, Hamilton; (2) Miss N. M. Dulmage, Toronto General Hospital, Toronto; (3) Miss M. Hoy, 27 Giles Blvd., Windsor; (4) Miss Freda Fell, Apt. 101, 2745 Yonge St., Toronto.

Prince Edward Island: (1) Miss Ina Gillan, 227 Kent St., Charlottetown; (2) Miss Anna Bennett, 102 Upper Prince St., Charlottetown; (3) Miss Ruth Ross, Summerside; (4) Miss M. Gamble, Albany R.R. No. 1, Tyron.

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Saskatchewan: (1) Miss Ann Morton, Weyburn; (2) Miss M. Ingham, Moose Jaw General Hospital, Moose Jaw; (3) Miss M. E. Pierce, Wolseley; (4) Miss Mary R. Chisholm, 805-7th Ave., Saskatoon.

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NURSING EDUCATION: Miss A. J. Macleod, University of Alberta, Edmonton, PUBLIC HEALTH: Miss M. E. Kerr, Eburne, B. C. PRIVATE DUTY: Miss M. Teulon, 1107 West 39th Ave., Vancouver.

Executive Secretary: Miss Jean S. Wilson, National Office, 1411 Crescent St., Montreal, P.Q.

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COUNCILLORS: **Alberta:** Miss J. Davidson, Royal Alexandra Hospital, Edmonton. **British Columbia:** Miss A. Cavers, Vancouver General Hospital. **Manitoba:** Miss F. Roach, St. Boniface Hospital, St. Boniface. **New Brunswick:** Sister Corinne Kerr, Hôtel Dieu Hospital, Campbellton. **Nova Scotia:** Sister Camillus of Lellis, Halifax Infirmary, Halifax. **Ontario:** Miss N. M. Dulmage, Toronto General Hospital, Toronto. **Prince Edward Island:** Miss A. Bennett, 102 Upper Prince St., Charlottetown. **Quebec:** Miss M. Batson, The Montreal General Hospital, Montreal. **Saskatchewan:** Miss M. Ingham, Moose Jaw General Hospital, Moose Jaw.

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COUNCILLORS: **Alberta:** Mrs. M. Tobin, 385-4th St., Medicine Hat. **British Columbia:** Mrs. J. F. Hansom, 1178 Esquimalt Ave., West Vancouver. **Manitoba:** Miss T. Greville, 797 Broadway, Winnipeg. **New Brunswick:** Miss Myrtle E. Kay, 21 Austin St., Moncton. **Nova Scotia:** Miss Marie LeBlanc, St. Martha's Hospital, Antigonish, **Ontario:** Miss Freda Fell, Apt. 101, 2745 Yonge St., Toronto, **Prince Edward Island:** Miss M. Gamble, Albany R. R. No. 1, Tyron. **Quebec:** Miss Marion E. Dart, 3563 Durocher St., Apt. 8. Montreal. **Saskatchewan:** Miss Mary R. Chisholm, 805-7th Ave., Saskatoon.

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Alberta Association of Registered Nurses

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Association of Registered Nurses of the Province of Quebec (Incorporated, 1920)

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